

MOTOR VEHICLE CLAIM

OWNER'S SATISFACTION FORM / DISCHARGE VOUCHER

TO : AIG ASIA PACIFIC INSURANCE PTE LTD  
78 SHENTON WAY #08-16  
AIG BUILDING  
SINGAPORE 079120

VEHICLE OWNER	: <u>BALPREET KAUR DHILLON</u>	CLAIM TYPE	: <u>OD</u>
MOTOR POLICY NO	: <u>1800045081-02</u>	REG NO	: <u>SLZ4939L</u>
VEHICLE MODEL	: <u>KIA CERATO</u>	EXCESS	: <u>\$600.00</u>
ACCIDENT DATE	: <u>16.07.2021</u>	WIP NO	: <u>36346</u>

REPAIRER'S NAME : **CYCLE & CARRIAGE KIA PTE LTD**  
**KIA SERVICE CENTRE**  
**209 PANDAN GARDENS**  
**SINGAPORE 609339**

I/We certify that the vehicle has been fully repaired to my entire satisfaction and that the payment of the repairer's charges that are claimable under the policy will be deemed in full and final settlement of my claim.

OWNER/INSURED SIGNATURE :   
DATE : 2/8/21  
TIME : 1700H