

CLAIM REF :S2M03W16

**DISCHARGE VOUCHER**

We/I EDWIN KANG WEE HUAT, **COMPANY REG NO:** SAF / HQ TPT, hereby agree to accept the sum of SIX HUNDRED THREE DOLLARS AND SEVENTY ONE CENTS ONLY ( SGD 603.71 ) paid to us/me by **AXA INSURANCE PTE LTD** as full and final settlement of all claims of whatever kind including damages for personal injuries and damages to property and all costs and expenses that we/I have and/or may have against the said **AXA INSURANCE PTE LTD** or their Insured or the driver of motor vehicle no. SJX7698X, as a result of an accident at ALONG TRANSIT ROAD on 06.01.2022 of which we/I were/was the hirer/owner/driver/rider/pillion/Passenger of motor vehicle no. 33311MID.

We/I hereby declare that the said insurer or owner and/or driver of insured vehicle shall not be liable for all claim(s) whatsoever and whosoever present or future that we/I have and/or may have against the said Insurer, owner and/or driver of vehicle no. SJX7698X in connection directly or indirectly with the said accident and give our/my full and final discharge.

We/I hereby declare that we/I are/am the person(s) entitled to receive the above settlement and hereby undertake to indemnify **AXA INSURANCE PTE LTD** against any claim made or to be made in respect of this settlement.

It is understood and agreed that payment herein is made without admission of liability whatsoever on the part of the said insurer, owner and/or driver of vehicle no. SJX7698X.

Dated this 01 day of July Year 20 22

Claimant's Signature : \_\_\_\_\_

NRIC no./ Company Stamp : SXXXX245G

Occupation/ Business : SAF HQ TRANSPORT

Address : SAF HQ TRANSPORT, KRANJI CAMP 3, 151 CHOA CHU KANG WAY, BLK 822, #01-04, SINGAPORE 688248

Telephone No. : 63734511

Witness's Name : HO AIK SENG, DENNIS

Witness's Signature : \_\_\_\_\_

Witness's NRIC No. : SXXXX034F