

**PRIVATE SETTLEMENT FORM**

1. Details of Accident

Date / Time: \_\_\_\_\_

Location: \_\_\_\_\_

2a. Motor-vehicle registration no. \_\_\_\_\_ driven by \_\_\_\_\_  
\_\_\_\_\_ (Name & NRIC)

2b. Motor-vehicle registration no. \_\_\_\_\_ driven by \_\_\_\_\_  
\_\_\_\_\_ (Name & NRIC)

3. There were no personal injuries or death involved.

4. The parties have agreed to settle this matter amicably as follows:

\*a. Neither party shall be liable to compensate the other party for any loss or damages (direct or indirect) incurred or to be incurred as a result of the accident.

\*b. without any admission of liability, \_\_\_\_\_ (Party paying compensation) has paid a sum of \$\_\_\_\_\_ which \_\_\_\_\_ (Owner receiving compensation) hereby acknowledges receipt there of in full and final settlement of all damages and cost incurred and/or to be incurred as a result of the accident.

\*c. That \_\_\_\_\_ (Name & NRIC no.) have received the aforesaid vehicle in good running order and damages that were caused as a result of the above-mentioned accident were repaired to satisfaction.

5. Both parties have not and will not make a police report of this accident.

6. Both parties will not file any accident claims for this accident.

Name :  
NRIC :  
Signature :  
Date :  
(Paying Party)

Name :  
NRIC :  
Signature :  
Date :  
(Party receiving compensation)