

MUTUAL SETTLEMENT FORM FOR MOTOR ACCIDENT



1. WE, THE UNDERSIGNED HEREBY AGREE TO MUTUALLY SETTLE AMONG OURSELVES A MOTOR ACCIDENT AS FOLLOWS:

Date / Time:	
Along:	
Involving Vehicle Number(s):	&

2. BOTH PARTIES HAVE AGREED TO SETTLE THIS MATTER AMICABLY AS FOLLOWS:

**Delete (A) and (B) as applicable.*

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

(B) Without admission of liability, _____ (Name) (Party paying compensation) has paid a sum of S\$_____ (Amount) which _____ (Owner of vehicle receiving compensation) herewith acknowledge receipt in full and final settlement of damages and costs incurred as a result of this accident.

Signature:	Signature:
Name:	Name:
I/C No:	I/C No:
Address:	Address:
Vehicle No.:	Vehicle No.:
Contact No.:	Contact No.:
Date:	Date: