



# TOTAL LOSS RELEASE FORM

## STRICTLY WITHOUT PREJUDICE

I/We \_\_\_\_\_

In consideration of the payment of US\$ \_\_\_\_\_

(In words \_\_\_\_\_ only)

hereby agree to accept the sum of US\$ \_\_\_\_\_

less US\$ \_\_\_\_\_

In respect of excess being \_\_\_\_ % of vehicle at time of loss in full and final settlement of my / our claim for loss and / or damage to my / our \_\_\_\_\_, vehicle registration number \_\_\_\_\_.

damaged in an accident on or about the \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_

Along / at \_\_\_\_\_

It is hereby agreed that of the amount mentioned above the sum of US\$ \_\_\_\_\_ shall be paid direct to \_\_\_\_\_ in discharge and/or reduction of the amount by me / us to them, under and in terms of Hire Purchase Agreement.

It is understood and agreed that the salvage of the aforesaid vehicle shall become the property of \_\_\_\_\_ and I/We will surrender the vehicle registration book and car keys before receiving payment. It is understood and agreed that the vehicle is deleted from the schedule of my / our Policy Number \_\_\_\_\_

Dated at \_\_\_\_\_ this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_

Insured's signature:

SIGN HERE

Witness signature:

SIGN HERE

### OFFICIAL USE ONLY

Authorised by: \_\_\_\_\_ Designation: \_\_\_\_\_

Signature:

SIGN HERE

Date:

