

**FILLING STATION**

Name of filling station		Filling station employee full name	
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(the “**Filling Station**”)

**VEHICLE**

Vehicle make		Vehicle registration number	
Odometer total (km)			

(the “**Vehicle**”)

**CLIENT**

Client full name		Client ID number	
Client contact number			

(the “**Client**”)

**INCIDENT**

Date of incident		Time of incident	
Description of incident			

(the “**Incident**”)

**DISCLAIMER (PLEASE READ CAREFULLY):**

By signing this document, the Client hereby fully acknowledges, consents, and agrees to the following:

1. The Filling Station may, at its sole discretion, elect to arrange the necessary towing of the Vehicle to the Filling Station’s nominated service provider in order to inspect, flush and replace all necessary filter- or similar parts of the Vehicle as a result of the Incident in order to prevent and/or mitigate any possible damages to the Vehicle (if any). All costs associated herewith will be for the Filling Station’s own account.
2. Should the Client for any reason whatsoever refuse that the Vehicle be handled as mentioned above, the Client hereby release and forever discharge the Filling Station and their employees, directors, owners, shareholders, insurers, administrators and assigns from any and all claims whatsoever nature in respect of all direct-, indirect-, or consequential damages, losses and injuries, both to any person or property (including, but not limited to, the Vehicle), resulting from the Incident as mentioned.
3. All of the Filling Station’s actions, gestures and/or costs incurred in terms of this document will not in any way, manner or form constitute any admission of guilt, liability or any other related concession or acknowledgement of wrongdoing on the Filling Station’s part with reference to the Incident. All such actions, gestures and/or costs by the Filling Station are made on a totally without prejudice basis which will in no way or form affect, influence or prejudice any rights belonging to the Filling Station’s directors, owners, shareholders, insurers, administrators and assigns.

**SIGNATURE AND EXECUTION**

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_.

**For the Client:**

Signature: \_\_\_\_\_

Full name: \_\_\_\_\_

**For the Filling Station:**

Signature: \_\_\_\_\_

Full name: \_\_\_\_\_

(Who warrant his/her authority)