



redefining / insurance

This Settlement excludes any bodily injuries arising out of the above said accident and pertains to property damage only

CLAIM REF : C0471870
INSURED : TRANS-CAB SERVICES PTE LTD

DISCHARGE VOUCHER

We, **PREMIER AUTOMOTIVE SERVICES PTE LTD** confirm that by letter of authorisation dated _____, we are authorised to and do hereby give this discharge for ourselves and on behalf of **PREMIER AUTOMOTIVE SERVICES PTE LTD** and the Hirer, _____ of vehicle no. **SHB 8008X**.

Now we **PREMIER AUTOMOTIVE SERVICES PTE LTD** for ourselves and the said Hirer and the driver jointly and severally:-

- agree to accept the sum of Singapore Dollars One Thousand Seven Hundred Ninety Only (\$S\$1,790.00) in the aggregate in full and final settlement of all claims of whatever kind including damages for personal injuries and/or damage to property that all and any of us may have against **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no **SHD 36G** arising out of an accident with **SHB 8008X** on **02/03/2018**.
- declare that **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of the Insured vehicle shall not be liable for any further claim(s) whatsoever or howsoever present or future that any of us may have against **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. **SHD 36G** arising directly/indirectly as a consequence of the accident and hereby give our full and final discharge.
- We hereby declare that I/we am/are 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 in favour of **PREMIER AUTOMOTIVE SERVICES PTE LTD** is made without any admission of liability whatsoever on the part of **AXA INSURANCE PTE LTD** and/or their Insured and/or the driver of vehicle no. **SHD 36G**.

Dated this 18 day of June 2018

Signed by _____
(AUTHORISED SIGNATORY)

Company Stamp _____

Witness : _____

Name : SHAFAWATI

I/C No : S8309324B

Address : _____

AUTHORISATION TO ACT

I/We, PREMIER TAXIS PTE LTD ("the third party claimant") of 23 CHANGI SOUTH AVENUE 2 #03-02 SINGAPORE 486443 (address), owner of SHB 8008X (vehicle no.) hereby authorize PREMIER AUTOMOTIVE SERVICES PTE LTD ("the workshop") to act for me with respect to my claim for repair costs and/or rental and/or loss of use ("claim") for my vehicle no. SHB 8008X that was damaged pursuant to the accident which occurred on 02/03/2018 (date) along SAGO LANE (location) involving vehicle no/s SHD 36G ("the accident").

I/We further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of "the workshop".

I/We further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Dated this 18 (day) of June (month) 2018 (year)



Signed by "the third party claimant"
(with chop if applicable)



Signed by "the workshop"
(with chop)

LETTER OF AUTHORITY

To: Premier Taxis Pte Ltd
23 Changi South Avenue 2
#03-02
Singapore 486443

And


Premier Automotive Services Pte Ltd
23 Changi South Avenue 2
#01-02
Singapore 486443

ACCIDENT INVOLVING SHB8008X & SHD36G
ON 2/3/18 AT/ALONG Sago Lane - Taxi stand

1. I, Koh Lay Siong, NRIC No. S6911131I
am the registered Hirer / Relief Driver of motor taxi No. SHB8008X at the
time of the above accident.

2. Hereby you have my authority to:

- (a) send a letter of demand on my behalf;
- (b) negotiate a settlement on my behalf;
- (c) confirm a settlement / accept any offer on my behalf;
- (d) sign any Discharge Voucher (if necessary) on my behalf;
- (e) receive payment of the settlement sum / compensation monies on my behalf including to request that the cheque for the settlement sum be made payable to you.

 S6911131I
Signature with NRIC No.

2/3/18
Date

Name: Koh Lay Siong
Bik 5 Tak Y, Drive #03-037 5590005
Address

Contact No.: 90024842

Email: _____