LETTER OF AUTHORITY & INDEMNITY

To Connect3

566 Woodlands Road (Mandai Estate) S (728697)

ACCIDENT INVOLVING VEHICLE NO. SIJSGLYYP AND X09535M AT MAING EGG DE TWO FOR Rd ON 06 05 2018.

- 1. If We, the owner of vehicle no. <u>Stras6 Hup</u> hereby instruct and authorize you to commence repairs to the said vehicle and to make 3rd party claim on my behalf for my loss and damage.
- Your are further authorized to appoint solicitors on my our behalf and give the solicitors full instructions as if
 the appointment is made and instructions are given by me us with respect to the conduct of my/ our claim
 against the third party driver and or his insurers including if necessary, to commence legal proceedings in
 Court in my/ our name against the 3rd party.
- 3. You have my/our full authority to instruct my/our solicitor to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit.
- 4. Upon resolving my/ our claim, you are authorized to agree with my/ our solicitors on the amount of their professional costs and disbursements for acting for me/ us and to receive payment of the balance of the settlement sum on my/ our behalf directly into your account.
- 5. In the event that I/ we am/ are required to attend at my/ our solicitors' office or to attend Court connection with my/ our claim, I/ we shall render full co-operation.
- 6. In the event that my/ our claim against the 3rd party and/ or his insurers is not successful or cannot be proceeded with, I/ we authorize you to make a claim against my/ our own insurers for the cost of repairs and any losses recoverable under my/ our policy of insurance. In this respect, I/ we understand and accept that personally liable to bear all Legal Costs incurred by you in claiming back for the repair costs by your solicitors.
- 7. I/ We hereby irrevocably direct all insurer to make all settlement sums payable to "Connect3" or my/ our solicitors, and not to me. Such payment shall be full and valid discharge by me/ us.
- 8. If the settlement sum is paid to me/ us directly by cheque from the insurer in their disobedience and/ or negligence of my above direction, I/ We shall forthwith exchange with you or pay you for the said cheque by my/ our cheque/ cash of the same amount or return you any payment in any manner as directed by you.
- 9. If for whatever reason, my/ our insurers reject my/our claim for indemnity for the cost of repairs and/ or any other losses recoverable under the policy of insurance or make an offer to pay less than the amount claimed by you or my insurance policy does not cover such claim, I/ we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonable incurred on my/ our behalf or to pay you the difference in amount, as the case may be.

X / Date this	08 of 05 2018
Signature: Name: Michael Thy NRIC No.: SIKO 178381.	Name of Witness:
(Company stamp, if applicable)	₹