## LETTER OF AUTHORISATION

F-1 AUTOCLINIC PTE LTD 25 KAKI BUKIT RÖAD 4 # 05-26 SYNERGY @KB Singapore 417800

Owner's Signature

Name:

(Company's stamp if applicable)

Involving Ve	hicle Nos_ GBH3794G & GBH3001L
Along	BLK 27 FLORA ROAD OPEN CARPARK
have involved	stered owner /driver of vehicle registration no: I in the above accident. y authorize M/S F-1 AUTOCLINIC PTE LTD to commence repairs of the said we
matter. And if	assign the whole proceeds of my/our comprehensive/third party claim to you and our to act on my/our behalf in respect of the above applicable,my/our solicitors shall accept this as my/our irrevocable authority to pay deemed compensated direct to you after deduction of their costs on a Solicitor and
ontone onnion	
	te to co-operate fully with you and our solicitors to ensure that claim is successful.
I/We undertal	te to co-operate fully with you and our solicitors to ensure that claim is successful.  sorize you to sign all discharge vouchers/indemnity forms and all necessary papers in the above claim in my/our absence.
I/We undertal  I/We also authorized the relation with the relation	orize you to sign all discharge vouchers/indemnity forms and all necessary papers in