

Occupation:

\*\*\* This Discharge Voucher applies only to the claimant's claim

or his property damage and will not affect his personal injuries claim and/or uninsured losses claim in a later date. Further, the settlement terms herein should not be used as an evidence to prejudice to the claimant's personal injuries claim and/or other uninsured losses claim arising of the

subject matter in this action.

## INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST. Reg. No. M2-0078806-X 64 | Cecil Street | #04 | #05 | #06-02 | IOB Bullding | Singapore 049711

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## EXPRESS SETTLEMENT

## DISCHARGE VOUCHER III-Direct Settlement (PODS)

India Ref: MCT18080046 Claimant Ref: TAX/08/18/2002/lg SMRT AUTOMOTIVE SERVICES PTE LTD ("the workshop") hereby confirm that we/l have reached an agreement with the appointed Surveyor of India International Insurance Pte Ltd LKK AUTO CONSULTANTS PTE LTD (name of Surveyor) with respect to the amount claimed for S\$ 1,500.00 (Global Sum - all in) use/rental), S\$ \_\_\_\_ (search fee), vehicle no.SHB4335Qhat was damaged pursuant to the accident which occurred on 01/08/2018 (date) at AIRPORT BOULEVARD (location) involving vehicle noSHB4335Qnsured vehicle). This is pursuant to the inspection conducted on 06/08/2018 (date) at "the workshop". SMRT TAXIS PTE LTD We/I confirm that we/I are/am authorized by the owner \_\_\_ claimant") of vehicle noSHD6389Z make the claim as set out in the above paragraph and we/l have full authority to settle the matter on his/her behalf in a manner that we/l deem fit. We/l enclose herein the letter of authority given by "the third party claimant". We/l further confirm that we/l will indemnify India International Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to cost of repairs and/or rental and/or loss of use pursuant to the damage to SHD6389Z/ehicle no.) as a result of the accident. We/I confirm that the agreement reached above is in full and final settlement of all claims of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis. This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same. We/I authorize you to pay the total amount of S\$ 1,500.00 to SMRT TAXIS PTE LTD RVICES CLAIMANT: WITNESS: NAZ Signature: Signature: Signed by appointed Surveyor Signed by "the workshop" (with chop) LKK AUTO CONSULTANTS PTE LTD Name: Name: 3 XX XX 7061-199607198R NRIC: NRIC: 60 Woodlands Industrial Park E4 51 UBI AVENUE 1 #01-25 Address: Address: Singapore 757705 Tel: 65 6482 3888 Fax: 65 6368 7421 PAYA UBI INDUSTRIAL PARK (S) 408933 www.smrt.com.sg Nationality: Nationality:

Occupation:

## **AUTHORIZATION TO ACT**

I, <u>SMRT TAXIS PTE LTD</u> (the third party claimant") of <u>60 WOODLANDS INDUSTRIAL</u>

<u>PARK E4 (S)757705</u> (address), owner of <u>SHD 6389Z</u> (vehicle no.) hereby authorize <u>SMRT</u>

<u>AUTOMOTIVE SERVICES PTE LTD</u> ("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 <u>SHD 6389Z</u> that was damaged pursuant to the accident which occurred on <u>01/08/2018</u> (date) along <u>AIRPORT</u>

<u>BOULEVARD</u> (location) involving vehicle no/s <u>SHB 4335C</u> ("the accident").

I 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 **SMRT TAXIS PTE LTD**.

I 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 \_\_\_\_\_\_ (day) of \_\_\_\_\_\_ [Ub \_\_\_\_ (month) 20 \_\_\_\_\_ (year)

Signed by "the third party claimant"

(with chop if applicable)

Signed by "the workshop" (with chop)