AUTHORIZATION TO ACT

(AIG Asia Pacific - Express Third Party Claim)

	I. Emil Fa jiva Binte kamari (the third party claimant") of
V	I, <u>Fmil Fa jiva Binte ka mani</u> (the third party claimant") of <u>Voluck no Shu 80686</u> hereby authorize <u>Cily Auth Ate Ltd</u> ("the workshop") to act for me with respect to my claim for medical expenses for <u>A1/4.60</u> that was damaged pursuant to the accident which occurred on <u>8/8/18</u> (date) along <u>P1 & Towarch Chyi Ext</u> (location) involving vehicle no/s <u>SXL/27/Y</u> ("the
	for me with respect to my claim for medical expenses for $\frac{21/4.60}{}$ that was damaged
	pursuant to the accident which occurred on 8/8/18 (date) along
	P/ & Towards Chyji Feet (location) involving vehicle no/s 5 27//("the</th
	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 the workshop.
	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 04 (day) of 04 (month) 20/9 (year)

Signed by "the third party claimant"

(with chop if applicable)

CITY AUTO PTE TO HOT BIK 8/Sin Ming Road #01-58/60/62 Sin Ming Ind Est #01-5 Sing Upore 575643
Tel: 6453 1235 Fax: 6453 7944
Tel: 6455 (Claims Section)

Signed by "the workshop"

(with chop)