

INDIA INTERNATIONAL INSURANCE PTE LTD

Cn. Reg. No. 196703792k | GST. Reg. No. M2-0070806-X 64 | Cecil Street | 804 | 805 | 866-02 | 108 Building | Singapore 049711 Office | 653-63476100 Email Insere@m.com.ag Fax (65)-62244174 Website www.ill.com.ag

Cecilia

EXPRESS SETTLEMENT

DISCHARGE VOUCHER III-Direct Settlement (PODS)

India Ref: Claimant Ref

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ith the appoin	ted Surveyor of India International Insurance Pte Ltd	EAST NO. O GOVERN	nati SS 749.00 / lipss of
	th respect to the amount claimed for S\$		
	(search fee), vehicle no. <u>8.4K.8171E</u> that we		
			lving vehicle no <u>seo sectu (insured</u>
ehicle) This is	pursuant to the inspection conducted on 18/11/2018 (c	tate) at 'the worksho	p".
/e/I confirm th	hat we'll are/am authorized by the owner	POLLY GOH PUI MEN	a("the third party
aimant") of vi	ehicle no. SIKSTRE to make the claim as set out in the	above paragraph	and we/I have full authority to settle
e matter on	his/her behalf in a manner that we/l deem fit. We/l er	clase herein the le	etter of authority given by "the third
arty claimant".			
Vell further on	onfirm that we'l will indemnify India International Insura	nce Pte Ltd for all	damages, loss and/or expense that
	ave already incurred in the event that "the third party		
	against the former for any loss and expenses suffered		
			an report a market summarine to the
r use punsuan	t to the damage to SJK#TITE (vehicle no.) as a result	I Of the accession	
W25 2 E			chains of the strint and string will
	that the agreement reached above is in full and final		
ursuant to the	e accident and that further this settlement is reached of	n a without prejudi	ce and without admission of liability
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LETTER OF AUTHORIZATION

To:	India International Insurance
	Singapore
Attn.:	Motor Claims Department
Dear Si	r / Mdm.
ON	OR ACCIDENT INVOLVING $55/\sqrt{577}$ Ξ (OWNER'S LE NO.) AND $50/\sqrt{5}$ (JATE) AT $08:15$ (TIME) ONG $5\cdot\sqrt{5}$ (ROAD)
I am the	registered owner of STK S171E (Vehicle No.).
its agent	authorise CYCLE & CARRIAGE INDUSTRIES PTE LIMITED and its or any person(s) authorised by Cycle & Carriage Industries Pte to do all or any of the following:-
• E	arty insurers; and/or execute and sign discharge voucher, indemnity forms and all necessary ocuments in connection with and arising from the above claim.
CYCLE &	nent towards settlement of my claim should be made in favour of & CARRIAGE INDUSTRIES PTE LIMITED.
4	Ry
	d Owner's Signature y stamp & authorized signature if it is a company-registered vehicle) : Ms Polly (Add Pai Mey : 51398 380