

### INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST. Reg. No. M2-0078806-X 64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711 Office (65) 63476100 Email insure@iii.com.sg Fax (65) 62244174 Website www.ili.com.sg

(vic)

## **EXPRESS SETTLEMENT**

DISCHARGE VOUCHER
III-Direct Settlement (PODS)

We/l, THINK ONE AUTOCARE PTE LTD ("the workshop") hereby confirm that we/l have reached an agreement

India Ref: MFL2019D0000052 Claimant Ref: PC4501P

with the appointed Surveyor of India International Insurance Pte Ltd of Surveyor) with respect to the amount claimed for S\$5, use/rental), S\$7.45 / (search fee), vehicle no. PC4501P that	992.00 (repair o	ost), S\$(loss of
on 09/01/2019 (date) at JURONG ISLAND HIGHV		
vehicle). This is pursuant to the inspection conducted on 24/01/2019	(date) at "the worksho	pp".
We/I confirm that we/I are/am authorized by the ownerA		
claimant") of vehicle no.PC4501Pto make the claim as set out in		
the matter on his/her behalf in a manner that we/l deem fit. We/l party claimant".	I enclose herein the I	etter of authority given by "the third
We/l further confirm that we/l will indemnify India International Ins	surance Pte Ltd for all	damages, loss and/or expense that
they will or have already incurred in the event that "the third p	arty claimant" after th	ne above said agreement lodges a
further claim against the former for any loss and expenses suffe		of repairs and/or rental and/or loss
of use pursuant to the damage to PC4501P (vehicle no.) as a re-	esult of the accident.	
We/I confirm that the agreement reached above is in full and f	inal settlement of all	claims of "the third party claimant"
pursuant to the accident and that further this settlement is reache		
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/l authorize you to pay the total amount of S\$ $6,719.45$ to	THINK ONE AUT	OCARE PTE LTD
	THINK ONE NOT	OO/INCL' TE ET D
Dated this day of		
20		
CLAIMANT: Think One Autocare Pte Ltd	WITNESS:	
Signature: 18 Defu Lane Avenue 2	Signature:	
Signature: Singapore 539522 Signed by the workshop (1984) Fax: 6842 1490 1990	o igridiaro.	Signed by appointed Surveyor
Name:	Name:	LKK AUTO CONSULTANTS PTE LTD
NRIC:	NRIC:	199607198R
Address:	Address:	51 UBI AVENUE 1 #01-25
		PAYA UBI INDUSTRIAL PARK (S) 408933
Nationality:	Nationality:	
Occupation:	Occupation:	

#### Karen Tan

From: Vic (LKKAuto) < vicalpeh@lkkauto.com>
Sent: Thursday, 11 July, 2019 10:05 AM

To: Karen Tan

Cc: Admin A; Vic (LKKAuto)

Subject: RE: PC4501P LOD LKK REF CC4/III19001511/Uhb3

Attachments: DV.pdf; III GIRO FORM.pdf

Without Prejudice

Dear Karen,

We refer to your below email.

Purely for an amicable settlement on a without prejudice basis and without admission of any liability to our Insured's part, we have our principal's mandate and we offer to settle your client's claim as below:

LTA Search Fee	\$ 7.45 -Pending Invoice
	\$ 7.45 -Pending Invoice
Loss of Use (\$180 x 4 days)	\$ 720.00
Cost of Repair (w/gst)	\$ 5,992.00

If agreeable, kindly chop and sign the attached DV then forward back to us (LKK) the original signed hard copy together with the duly chop and signed GIRO FORM (if not yet applied) for payment processing.

The above amount is to be made payable to THINK ONE AUTOCARE PTE LTD.

#### Thank you.

"Please note that our above offer and any settlement arising from the above offer are made on a without prejudice basis, and should not be construed as an admission of liability on our part or on the part of our Insured Driver. Terms of such settlement should also not be disclosed in any other related matter(s) in respect of the accident. Our offer made in respect of this present matter is made solely to resolve this matter only. No reference shall be made to this offer or any settlement arising from this offer in any other related matters.

Best Regards,

Vic Alpeh | Case Handler

#### LKK Auto Consultants Pte Ltd

Phone: 6841-2096 | email:  $\underline{vicalpeh@lkkauto.com}$  | fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

Save the Earth Print only when necessary.

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# DIRECT CREDIT AUTHORISATION FORM

nis form is to be completed by the Supplier of	. Payment will be credited directly e of Paying Organisation)
to the Supplier's bank account stated below through In tain his banker's certification in Part	terbank Giro. The Supplier has to complete Part I of the form,
(Name of Paying Organisation)	
Part I (To B	e Completed By Supplier)
A) To:	
(Name of Paying Organisation)	
Supplier's Particulars:	
	170 CIADE 1275170
Name : (MINICED & E TI	E AVENUE 2 , SPORE 53922
Address : 10 VGFC/LFN	7,00000
Telephone Number:	Fax Number:Name of Branch:
Name of Bank :: MAY BANK	Name of Branch:
Account Number To Be Credited : 0421	10 2433
I/We hereby authorise	to credit payments due to me/us to the above account.
(Name of Paying Organisat	ion)
my/our address last known to you.	iscretion terminate this arrangement by written notice delivered to
the event of a change of bank account, I change.	/we shall inform you in writing 2 weeks in advance before the
D) To	
B) To:(Name of Supplier's Bank)	
I/We hereby consent to the Bank's disclosure document.	of customer information relating to me/us as requested for in th
SINGS P	
(E) (E)	22/7/2019
K NEDSA *	7211
Signatures and Company's stamp As In Bank Acco	ount Date
Part II (To Be C	Completed By Supplier's Bank)
(Name of Paying Organisation)	
Without responsibility on the part of the B	ank or the signing officer, we confirm that the signature/other
particulars agree with that in our files. The a	account number to be presented in the Interbank Giro format is a
follows:  Bank Branch Acc	ount Number
Name & Signature of Authorised Bank Office	Date