

*** This Discharge Voucher applies only to the claimant's claim for his property damage and will not effect his personal injuries claim and/or uninsured losses claim in a later date.

EXPRESS SETTLEMENT

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.

DISCHARGE VOUCHER

III- Direct Settlement (PODS)

India Ref: MCT19010207
Claimant Ref: LB0119-2581

We/I, LEE BROTHERS AUTOMOTIVE PTE LTD ("the workshop") hereby confirm that we/I 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\$ 3,852.00 (repair cost), S\$ 1,080.00 (loss of use/rental), S\$ 36.45 (search fee), vehicle no. SBT136M that was damaged pursuant to the accident which occurred on 08/01/2019 (date) at UPPER CHANGI ROAD (location) involving vehicle no. SHC8485X (insured vehicle). This is pursuant to the inspection conducted on 28/01/2019 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner JOHN LEE SIOK JONG ("the third party claimant") of vehicle no. SBT136M to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I 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 SBT136M (vehicle 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\$ 4,968.45 to LEE BROTHERS AUTOMOTIVE PTE LTD

Dated this day of 20

CLAIMANT:

Signature: _____

Signed by "the workshop" (with chop)

Name: _____

NRIC: _____

Address: _____

Nationality: _____

Occupation: _____

WITNESS:

Signature: _____

Signed by appointed Surveyor

Name: _____

NRIC: _____

Address: _____

Nationality: _____

Occupation: _____

Lee Brothers Automotive Pte. Ltd.
1 Kaki Bukit Avenue 6
#02-47 Autobay Singapore 417883
Tel: (65) 6509 5521 Fax: (65) 6509 5523
Email: sales@leebrothers.com.sg
Co. Reg. No: 201101880C

LKK AUTO CONSULTANTS PTE LTD

199607198R

51 UBI AVENUE 1 #01-25

PAYA UBI INDUSTRIAL PARK (S) 408933

DIRECT CREDIT AUTHORISATION FORM

This form is to be completed by the Supplier of India International Insurance Payment will be credited directly
(Name of Paying Organisation)
into the Supplier's bank account stated below through Interbank Giro. The Supplier has to complete Part I of the form,
obtain his banker's certification in Part II and return the duly completed form to
India International Insurance
(Name of Paying Organisation)

Part I (To Be Completed By Supplier)

(A) To: India International Insurance
(Name of Paying Organisation)

Supplier's Particulars:

Name : Lee Brothers Automotive Pte Ltd
Address : 1 Kati Buri Avenue 6 #101-07 Aulokay Singapore 417883
Telephone Number: 94880844 Fax Number: 6509 1123
Name of Bank : OCBC Name of Branch: Ubi Branch
Account Number To Be Credited : 588-077891-001

I/We hereby authorise India International Insurance to credit payments due to me/us to the above account.
(Name of Paying Organisation)

This authorisation shall continue to be in force until I/we have expressly revoked it by notice in writing delivered to you. You may in your absolute discretion terminate this arrangement by written notice delivered to my/our address last known to you.

In the event of a change of bank account, I/we shall inform you in writing 2 weeks in advance before the change.

(B) To: OCBC
(Name of Supplier's Bank)

I/We hereby consent to the Bank's disclosure of customer information relating to me/us as requested for in this document.



[Signature]

Signatures and Company's stamp As In Bank Account

20/08/2019
Date

Part II (To Be Completed By Supplier's Bank)

To: India International Insurance
(Name of Paying Organisation)

Without responsibility on the part of the Bank or the signing officer, we confirm that the signature/other particulars agree with that in our files. The account number to be presented in the Interbank Giro format is as follows:

Bank	Branch	Account Number
7339	588	077891001

[Signature]
Jenny Low
9220
OCBC Bank



Name & Signature of Authorised Bank Officer

21 AUG 2019
Date