

## EXPRESS SETTLEMENT

### DISCHARGE VOUCHER III-Direct Settlement (PODS)

India Ref: MCT19010804  
Claimant Ref: SME 8146E

We/I, WEI LEE MOTOR WORKS ("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\$ 2,140.00 (repair cost), S\$ 840.00 (loss of use/rental), S\$ 7.45 (search fee), vehicle no SME8146E that was damaged pursuant to the accident which occurred on 27/01/2019 (date) at JURONG GATEWAY (location) involving vehicle no SHD4121S (insured vehicle). This is pursuant to the inspection conducted on 30/01/2019 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner KH LEASING PTE LTD ("the third party claimant") of vehicle no SME8146E 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 SME8146E (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\$ 2,987.45 to WEI LEE MOTOR WORKS.

Dated this 27 day of Feb 20 19

**CLAIMANT:**

Signature: 

Name: Wei Lee Motor Works


NRIC: 269436100J

Address: BIR 9 Sin Ming Rd  
#01-32

Nationality: \_\_\_\_\_

Occupation: \_\_\_\_\_

**WITNESS:**

Signature: 

Name: LKK AUTO CONSULTANTS PTE LTD

NRIC: 199607198R

Address: 51 UBI AVENUE 1 #01-25  
PAYA UBI INDUSTRIAL PARK (S) 408933

Nationality: \_\_\_\_\_

Occupation: \_\_\_\_\_

## DIRECT CREDIT AUTHORISATION FORM

This form is to be completed by the Supplier of India International Insurance PL. 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 Pte Ltd.  
(Name of Paying Organisation)

### Part I (To Be Completed By Supplier)

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

#### Supplier's Particulars:

Name : Wei Lee Motor Works  
Address : Blk 9, Sin Ming Industrial Estate Sector C, #01-28, S 575644  
Telephone Number: 6459 9830 Fax Number: 6458 0128  
Name of Bank : OCBC Bank Name of Branch: Thomson Branch  
Account Number To Be Credited : 531038883001

I/We hereby authorise India International Insurance PL 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 Bank  
(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.

Signatures and Company's stamp As In Bank Account

28 / 2 / 2019  
Date

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

To: \_\_\_\_\_  
(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

031

038883001

Name & Signature of Authorised Bank Officer

28 FEB 2019  
Date