

TO : POH KIN

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.iii.com.sg

EXPRESS SETTLEMENT

DISCHARGE VOUCHER III-Direct Settlement (PODS)

India Ref: TP/MCT19020632 Claimant Ref : AAD1902-185

We/I, Trans-Cab Auto Services Pte Ltd ("the workshop") he	reby confirm that we/l have reached an agreement
with the appointed Surveyor of India International Insurance Pte LtdL	KK Auto Consultants Pte Ltd (name
	(repair cost), S\$(loss of
use/rental), S\$ (search fee), vehicle no. SHD 5295S that was	damaged pursuant to the accident which occurred
on 22/02/2019 (date) at	(location) involving vehicle no. SH 6405J (insured
vehicle). This is pursuant to the inspection conducted on 25/02/2019 (date	e) at "the workshop".
We/I confirm that we/I are/am authorized by the ownerTRANS-CABS	ERVICES PTE LTD ("the third party
claimant") of vehicle no. SHD 5295S to make the claim as set out in the a	
the matter on his/her behalf in a manner that we/l deem fit. We/l enclose	ose herein the letter of authority given by "the third
party claimant".	
We/I further confirm that we/I will indemnify India International Insurance	e Pte Ltd for all damages, loss and/or expense that
they will or have already incurred in the event that "the third party cl	aimant" after the above said agreement lodges a
further claim against the former for any loss and expenses suffered per	ertaining to cost of repairs and/or rental and/or loss
of use pursuant to the damage to $\underline{\mbox{SHD 5295S}}$ (vehicle no.) as a result of	f the accident.
We/I confirm that the agreement reached above is in full and final se	ettlement of all claims of "the third party claimant"
pursuant to the accident and that further this settlement is reached on a	a without prejudice and without admission of liability
basis.	
This agreement is subject to the application of Singapore law and the Si	ngapore Courts have exclusive jurisdiction over any
dispute arising out of the same.	
We/I authorize you to pay the total amount of S\$ 2,531.36 to Tra	ns-Cab Auto Services Pte Ltd
\/	
Dated this 4 day of JULY 20 19	
(2) (22)(2)	
CLAIMANT: 2 (999) AL (5)	WITNESS:
Simulation of the state of the	Ciamatura
Signature: Signed by "the workshop" (with chop)	Signature: Signed by appointed Surveyor
land to T	News
C740EG3GI	Name:
NRIC: TRANS-CAB AUTO SERVICES PTE LTD	NRIC: TRANS-CAB AUTO SERVICES PTE LTD
Address: No. 2 Ang Mo Kio Street 63	Address: No. 2 Ang Mo Kio Street 63
Cingapore 569111	Shigapore 303 E E E
Tel: 6287 6666 Fax: 6287 7764	
Nationality: SIPORE	Nationality:
Occupation: 4M	Occupation:

TRANS-CAB SERVICES PTE LTD

No. 2 Ang Mo Kio Street 63 Singapore 569111 Tel No. : 6287 6666 Fax No. : 6281 1400

Co./GST Reg. No. 200303878K

Authorization To Act

I, chong Wei chiew	(Hirer),	S 1439901 A	(NRIC r	10.)
hereby authorize Trans-cab S	ervices Pt	e Ltd to act o	on my behalf to	o claim
for my loss of earnings for the	accident	involving	S405295 S	and
SH 6405Jalong	CTE TOW	ards AYE		
onatatatoq	hrs.			
In addition, we also hereby a favour of Trans-cab Auto Servi	uthorize tl ices Pte Lt	ne above po d upon settle	ayment to be i ement.	made in
Dated this day of	fFeb	* * * * * * * * * * * * * * * * * * *	2019	E
Est-				
(Hirer's signature)				
Name:- chong Wei chiew				
NRIC Number:				
Address: Bik 361 B Sengkang	East Way			
\$ 06-414 SE SH.				