

## EXPRESS SETTLEMENT

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

India Ref: TP / MCT19040742  
Claimant Ref: SKB5693B

We/I, HIAP HONG MOTOR REPAIR ("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\$ 1,000.00 (repair cost), S\$ 150.00 (loss of use/rental), S\$ — (search fee), vehicle no. SKB5693B that was damaged pursuant to the accident which occurred on 25/04/2019 (date) at 11 YORK HILL C/P (location) involving vehicle no. SHA4174E (insured vehicle). This is pursuant to the inspection conducted on 02/05/2019 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner CHUNG CHYI WEI ("the third party claimant") of vehicle no. SKB5693B 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 SKB5693B (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\$ 1,180.00 to HIAP HONG MOTOR REPAIR.

Dated this 06 day of NOV 2019

CLAIMANT:

Signature:

Name:

NRIC:

Address:

Nationality:

Occupation:

**HIAP HONG MOTOR REPAIR**

2 Kaki Bukit Avenue 2

#02-13 AutoHub Singapore 417921

Signed by "the workshop" with shop

Signature:

Name:

NRIC:

Address:

Nationality:

Occupation:

Signed by appointed Surveyor

LKK Auto Consultants Pte Ltd

199607198R

51 Ubi Avenue 1

#01-25 Paya Ubi Ind. Park S(408933)

Chua Meng Liang

S1191816F

2 Kaki Bukit Ave 2

Auto Hub # 0213 (S) 417921

Singapore

Manager

## DIRECT CREDIT AUTHORISATION FORM

This form is to be completed by the Supplier of India International Insurance P.L. 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 P.L.  
(Name of Paying Organisation)

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

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

#### Supplier's Particulars:

Name : Hiap Hong Motor Repair  
Address : 2, Kaki Bukit Ave 2 AutoHub #02-13 (S) 417921  
Telephone Number: 67459633 Fax Number: 67478602  
Name of Bank : RHB Name of Branch: Geylang  
Account Number To Be Credited : 380-007603-09

I/We hereby authorise India International Ins 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: RHB  
(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.

協 豐 摩 哆  
**HIAP HONG MOTOR REPAIR**  
2 Kaki Bukit Avenue 2  
#02-13 AutoHub Singapore 417921  
Tel: 6745 9633 Fax: 6747 8602

Signatures and Company's stamp As In Bank Account

06-11-2019  
Date

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

To: RHB  
(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

7366 003 38090760309

Aw Yunn Shyen  
455682



Name & Signature of Authorised Bank Officer

06 NOV 2019

Date