



Cecilia

India Int'l Insurance Pte Ltd  
 64 Cecil Street  
 #04-05 IOB Building  
 Singapore 049711  
 Attention: Motor Claims

**"Without Prejudice"**

Your Ref :

Our Ref :

Date : 04 July 2019

Subject : **ACCIDENT INVOLVING VEHICLES SKU242C & SHA7945C ON 06.05.2019**

Dear Sirs

We refer to the above matter.

The accident was caused solely by the negligence on the part of your insured. As a result of the said accident, our client has suffered losses which are set out hereunder as follows:-

Cost of repair	:	S\$	5068.64
Loss of use	:	S\$	360.00 (S\$120.00 x 3 days)
Total	:	S\$	5428.64

A copy of each of the following supporting documents is enclosed:

1. Copy of Accident Report
2. Copy of Final Repair bill & Certificate of Insurance
3. Copy of Identification Card & Driving License
4. Copy of Letter of Authorisation & Discharge Voucher

Performance Motors  
 Limited  
 1800-Call-BMW  
 (1800-2255-269)  
 www.pml.com.sg

303 Alexandra Road  
 Sime Darby  
 Performance Centre  
 Singapore 159941  
 Tel Sales 6319 0100  
 Tel Aftersales:  
 6319 0111  
 Fax 6474 7770

315 Alexandra Road  
 #01-01  
 Sime Darby  
 Business Centre  
 Singapore 159944  
 Tel Sales 6319 0511  
 Tel Aftersales  
 6319 0527  
 Fax 6479 6624

280  
 Kampong Arang Rd  
 East Coast Centre  
 Singapore 438180  
 Tel Aftersales  
 6319 0888  
 Fax 6344 1332

Registered office  
 305 Alexandra Road  
 #02-01  
 Vantage  
 Automotive Centre  
 Singapore 159942

Co. Reg. No:  
 197401559/W

Please note that you or your insured should send us an acknowledgement of receipt of this letter within fourteen (14) days from the date of this letter, failing which our client will have no alternative but to commence legal proceedings against you without any further notice to you or your insured.

Should you have a counterclaim against our client arising out of the accident, you are also required to send a letter giving full particulars of the counterclaim together with all relevant supporting documents within eight (8) weeks of your receipt of this letter.

For any correspondence, please contact Ms Caroline Tan at 6319-0174 / Fax. 6479-4601 or email to pml-pbsp@simedarby.com.sg.

Yours sincerely

Cresendo Lagman  
 Customer Service Manager, Body & Paint

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

### ACCIDENT STATEMENT

Date Of Report	06/05/2019 17:33
Date Of Accident	06/05/2019 14:25
Exact Location Of Accident	339 THOMSON RD SINGAPORE 307677
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKU242C
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#### Insured/Policyholder

Name Of Registered Owner	PERMA SHIPPING LINE PTE LTD
Co Reg No	200722721K
Email Address	JASONTAN_80@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97440445
Alternative Phone No	OFFICE-NOPHONE

#### Vehicle Particulars

Manufacturer	BMW
Model	X3-3.0I
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

#### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5081279704-02
Cover Note Number	

#### Driver

Name of Driver	TAN CHOON HIONG
NRIC No	S8034277B
Date Of Birth	29/10/1980
Occupation	INDOOR
Date Of Driving Pass	29/11/2005
Driving Experience	13 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97440445
Fax Number	
Contact Number	
EMail Address	JASONTAN_80@YAHOO.COM.SG

Address	3 TEMASEK AVENUE #15-01 CENTENNIAL TOWER
Postcode	039190
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO SKETCH PLAN

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA7945C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	ABD RAHIM BIN SUPARI
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:

(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

(ii) investigating the accident and/or my claims;

(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(collectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

(d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.

(e) the information so collected under (d) above may be shared / disclosed:

(i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirements under any regulations, laws or court orders.

TAN CHOON HIONG

06/05/2019 15:13

\_\_\_\_\_  
Policyholder's Signature / Date &  
Time

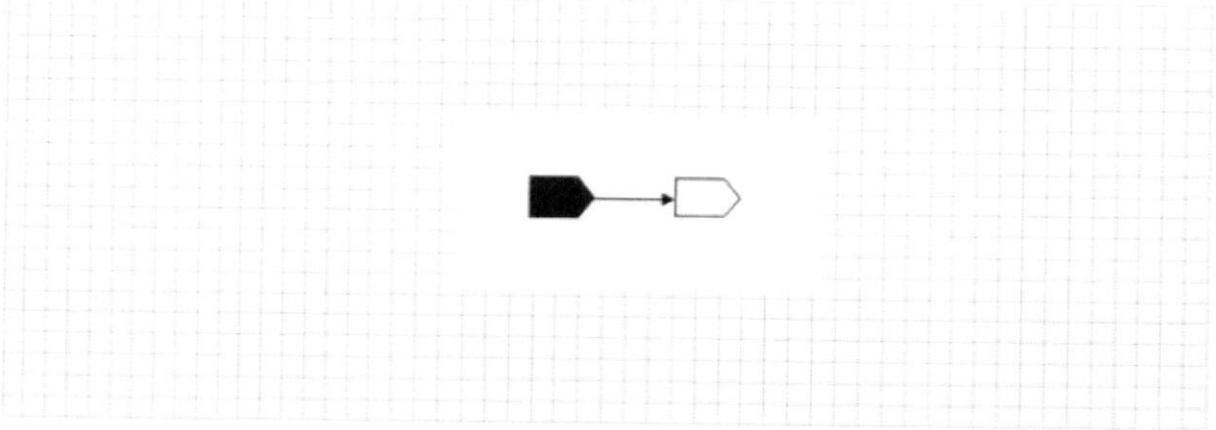
\_\_\_\_\_  
Driver's Signature (if driver is not the policyholder) / Date  
& Time

\_\_\_\_\_  
Witnessed by Reporting Centre  
Personnel

## Sketch Plan #2

### Sketch Plan

The sketch plan is based on the closest scenario.  
Please refer to "Circumstances of the Accident".



### Describe Circumstances of the Accident

BLACK CAR : SHA7945C

WHITE CAR : SKU242C

#### DESCRIPTION :

I'm Turning out from Thomson Medical Centre towards the main road, Thomson road and there is roadwork on the left side (1st lane) I stop due to on coming traffic and after few second, one taxi directly behind me, bang into back of my car.

### Declaration

I/We declare the foregoing particulars are true in every respect.

TAN CHOON HIONG  
06/05/2019 15:13

\_\_\_\_\_  
Policyholder's Signature / Date &  
Time

\_\_\_\_\_  
Driver's Signature (If driver is not the policyholder) / Date  
& Time

\_\_\_\_\_  
Witnessed by Reporting Centre  
Personnel

# Performance Motors Limited

A member of the Sime Darby Group  
Co. Reg. No. 197401559W GST Reg. No M2-0020081-x



303, Alexandra Road  
Sime Darby Performance Centre  
Singapore 159941  
Tel. 63190100 (Sales & Admin)  
63190111 (AfterSales)  
Fax. 64747770

280, Kampong Arang Road  
East Coast Centre  
Singapore 438180  
Tel. 63190888 (AfterSales)  
Fax. 63449773

315, Alexandra Road  
Sime Darby Business Centre  
Singapore 159944  
Tel. 63190528 (AfterSales)  
63190533/530 (Motorrad)  
64796601 (AfterSales)  
64796624 (Motorrad)

## SERVICE TAX INVOICE

Repair Order No. : <b>B1 1365338</b>	Page No. : <b>1 of 2</b>
Date IN : <b>28/05/2019</b>	Invoice Number : <b>2118145 / WSB</b>
Motor Claim Advisor: <b>Inthiran A/L Thurasamy</b>	Invoice Date : <b>03/07/2019</b>
	Payment Terms : <b>30 Days From Invoice</b>
	Invoice By : <b>Toh Jing Xuan</b>

<p><b>- CUSTOMER INFORMATION -</b> Perma Shipping Line Pte Ltd Continental Tower 3 Temasek Avenue #15-01  Singapore 039190</p>	<p><b>- INVOICE TO - 219</b> India Int'L Insurance Pte Ltd 64 Cecil Street #04-05 IOB Building Singapore 049711</p>
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REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SKU242C	0F90097	29/06/2015	X4 XDRIVE 35I	68956

- - - - LABOUR 1 - - - -		NETT
To replace rear bumper and attachments, rear underside guard including knock out dented area caused by the accident.		850.00
To respray rear bumper.		934.00
To check electrical wiring systems and lightings at the rear section for proper function.		150.00
Sundries.		80.00
INS CLAIMS : ACCIDENT REPAIR. DIRECT SETTLEMENT.		0.00
DATE OF ACCIDENT : 06.05.2019. 3RD PARTY CAR : SHA7945C.		
YOUR REF NO : NIL.		
VEHICLE WAS SURVEYED BY MR STEVE CHEN FROM LKK AUTO ON 28.05.2019 AT 11AM. AUTHORISED REPAIR BY MS JOY IRENE FROM LKK AUTO ON 21.05.2019 VIA EMAIL.		
PROPOSE LOSS OF USE = \$120x3. THE AMOUNT IS SUBJECTED TO INSURANCE COMPANY CONFIRMATION.		0.00
Total Labour 1:		<b>2,014.00</b>
- - - - PARTS - - - -		
	Qty      Retail Price	NETT
RR BUMPER CARRIER ECE	1      797.80	797.80
REAR BUMPER PANEL PRIMED (X LINE)	1      1,444.50	1,444.50
REAR BUMPER CLADDING (PDC/SCHWARZ)	1      212.35	212.35
UNDERSIDE GUARD PRIMED REAR (X LINE)	1      268.40	268.40
Total Parts :		<b>2,723.05</b>

303, Alexandra Road  
Sime Darby Performance Centre  
Singapore 159941  
Tel. 63190100 (Sales & Admin)  
63190111 (AfterSales)  
Fax. 64747770280, Kampong Arang Road  
East Coast Centre  
Singapore 438180  
Tel. 63190888 (AfterSales)  
Fax. 63449773315, Alexandra Road  
Sime Darby Business Centre  
Singapore 159944  
Tel. 63190528 (AfterSales)  
63190533/530 (Motorrad)  
64796601 (AfterSales)  
64796624 (Motorrad)**SERVICE TAX INVOICE**

Repair Order No. : <b>B1 1365338</b>	Page No. : <b>2 of 2</b>
Date IN : <b>28/05/2019</b>	Invoice Number : <b>2118145 / WSB</b>
Motor Claim Advisor: <b>Inthiran A/L Thurasamy</b>	Invoice Date : <b>03/07/2019</b>
	Payment Terms : <b>30 Days From Invoice</b>
	Invoice By : <b>Toh Jing Xuan</b>

Labour Charges : <b>1,934.00</b>	Total Labour & Parts Charges : <b>S\$ 4,737.05</b>
Parts Charges : <b>2,723.05</b>	Less Insurance Excess : <b>S\$ 0.00</b>
Lubricant/Misc : <b>80.00</b>	Invoice Total Amount Exclude GST : <b>S\$ 4,737.05</b>
	GST @ 7% : <b>S\$ 331.59</b>
	Invoice Total Amount Include GST : <b>S\$ 5,068.64</b>

Computer generated invoice. No signature is required.

**Amount Payable Include GST : S\$ 5,068.64**

All amounts are in Singapore Dollars.

Work was carried out subject to the Company's Terms and Conditions of Service.

No complaints will be entertained unless reported within seven (7) days of the date of this invoice.

For credit purchases, interest @1% per month will be debited on overdue amounts.



BMW Dealer

# Performance Motors Limited

A Sime Darby Motors Company  
 Co. Reg. No. 197401559W GST Reg. No M2-0020081-x  
 Toll-Free Number (1800-2255269)

303, Alexandra Road  
 Sime Darby Performance Centre  
 Singapore 159941  
 Fax. 64747770

280, Kampong Arang Road  
 East Coast Centre  
 Singapore 438180  
 Fax. 63449773

315, Alexandra Road  
 Sime Darby Business Centre  
 Singapore 159944  
 Fax. 64796601 (AfterSales)  
 64796624 (Motorrad)



28-05 @ 10am  
 - survey before 12pm

GST REG. NO : M2 - 0020081 - X

## ESTIMATE

10 MAY 2019

Estimate No. : b1 51145	Page No. : 1 of 4
Date Estimated : 10/05/2019	
Prepared By : Inthiran A/L Thurasamy	

<p><b>- ESTIMATE REPAIR FOR -</b>                  Perma Shipping Line Pte Ltd                  Continental Tower 3 Temasek Avenue                  #15-01                  Singapore 039190</p>	<p><b>- ACCOUNT - 40000</b>                  Cash Sales - Service                  Singapore</p>
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REGN. NO.	CHASSIS NO.	REGN. DATE	MODEL	MILEAGE
SKU242C	0F90097	29/06/2015	X4 xDrive 35i	0

DESCRIPTION	VALUE
To replace rear bumper and attachments.	880 1,275.00
Painting rear bumper.	934 1,038.00
To check electrical wiring systems and lightings at the rear section for proper function.	150 177.00
Sundries.	/ 80.00
<b>Total Labour 1:</b>	<b>2,570.00</b>

DESCRIPTION	QTY	PRIC	VALUE
REAR BUMPER SET MOUNTING PARTS (VAL / MEC	1	38.55	38.55
REAR BUMPER PANEL PRIMED (X LINE) / BO	1	1,444.50	1,444.50
REAR BUMPER CLADDING (PDC/SCHWARZ) / cut	1	212.35	212.35
UNDERSIDE GUARD PRIMED REAR (X LINE) (S/L) cut	1	268.40	268.40
<b>Total Parts :</b>			<b>1,963.80</b>

Stew CLKK) M Paik 28/5/19, 11.00am  
 3 dy  
 P/P  
 By Bel spy

Labour 1	2,570.00
Parts	1,963.80
Labour 2	0.00
Excess	0.00
Total GST @ 7%	317.37
<b>Grand Total</b>	<b>4,851.17</b>

\*\* THIS ESTIMATE IS VALID FOR A PERIOD OF 30 DAYS ONLY\*\*  
 \*\* PRICE FOR PARTS ARE SUBJECTED TO CHANGE WITHOUT PRIOR NOTICE \*\*

**Certificate of Insurance**

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960  
ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5081279704-02 Cover : drive PREMIUM

- |   |                               |
|---|-------------------------------|
| 1. Index mark and Registration Number of Vehicle  | : SKU242C                     |
| Chassis Number  | : WBAXW520800F90097           |
| 2. Name of Policyholder   | : PERMA SHIPPING LINE PTE LTD |
| 3. Effective Date of Insurance  | : 29 Jun 2018                 |
| 4. Expiry Date of Insurance   | : 28 Jun 2019                 |
| 5. Persons or Classes of Persons entitled to drive#   |                               |
| (a) The Policyholder.   |                               |
| (b) Any other person who is driving on the Policyholder's order or with his/her permission.   |                               |
| Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. |                               |
| 6. Limitations as to Use#   |                               |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.   |                               |

**This Policy does not cover**

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: YES
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : KCB AGENCY (00000614904)  
Date of Issue : 28 Jun 2018 09:23 hrs

**KCB AGENCY**  
Co. Reg. No. 53119552C  
200 Jalan Sultan  
#02-353 Textile Centre  
Singapore 195018  
Tel: 6391 3813 Fax: 6391 3810

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

\_\_\_\_\_  
Authorised Officer

\_\_\_\_\_  
Chief Executive

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **S8034277B**

Name: **TAN CHOON HIONG (CHEN JUNXIONG)**

Birth Date: **29 Oct 1980**

Issue Date: **15 Jan 2003**

000128786G




**REPUBLIC OF SINGAPORE**  
**IDENTITY CARD NO. S8034277B**



Name: **TAN CHOON HIONG (CHEN JUNXIONG)**  
**陈俊雄**

Race: **CHINESE**

Date of birth: **29-10-1980** Sex: **M**

Country of birth: **SINGAPORE**

S8034277B



**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)**

		PASS DATE
Class 2B	Motorcycles =< 200 CC	10 Dec 2001
Class 3A	Motor cars without clutch pedals =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors/vehicles without clutch pedals =< 2500 kg	29 Nov 2005

S/No. 9000045580

Licence No: S8034277B



NP 428A



4 6 5 1 0 4

NRIC No: **S8034277B**



Date of issue: **18-11-2010**

Address: **370 ALEXANDRA ROAD  
#03-02  
SINGAPORE 159953**

# Performance Motors Limited

A member of the Sime Darby Group



## LETTER OF AUTHORISATION

**ACCIDENT INVOLVING** SKU242C & SHW 7945C **ON** 6-05-2019.

I, Perma Shipping Line owner of Vehicle Registration No. SKU242C hereby authorise **Performance Motors Limited** to submit, correspond, negotiate and settle my claim for cost of repair and/or uninsured losses arising from the above accident.

I further authorise **Performance Motors Limited** to execute, sign, seal and deliver all documents whatsoever in relation to this matter and to accept and receive any payment due to me in respect of my claim above.

I hereby declare that all acts and documents done by virtue of this Letter of Authorisation on my behalf shall be good valid and effectual to all intents and purposes whatsoever as if the same had been done or executed by me in person.

I further confirm that the acceptance by **Performance Motors Limited** of the settlement amount in respect of such claim shall constitute the full discharge of my claim in respect of such loss and damage.

Signed by:



Name: TAN CHOON HING (Date)

NRIC No.: S9034277B

In the presence of:

Name: \_\_\_\_\_ (Date)

NRIC No.: \_\_\_\_\_



## EXPRESS SETTLEMENT

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

India Ref:  
Claimant Ref :

We/I, Performance Motors Limited ("the workshop") hereby confirm that we/I have reached an agreement with the appointed Surveyor of India International Insurance Pte Ltd Liak Auto Consultants Pte Ltd (name of Surveyor) with respect to the amount claimed for S\$ 5068.64 (repair cost), S\$ 360.00 (loss of use/rental), S\$ - (search fee), vehicle no. SKU242C that was damaged pursuant to the accident which occurred on 6/5/19 (date) at 339 Thomson Road S (307677) (location) involving vehicle no. SHA 745C (insured vehicle). This is pursuant to the inspection conducted on 28/5/19 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner Perma Shipping Line Pte Ltd ("the third party claimant") of vehicle no. SKU242C 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 SKU242C (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\$ \_\_\_\_\_ to Performance Motors Limited

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: \_\_\_\_\_

Inthiran A/L Thurasamy  
Performance Motors Limited  
303 Alexandra Road  
Sime Darby Performance Centre  
Singapore 159941