

26/07/2019

Sales Office :
21 Bukit Batok Crescent #08-76 Wcega Tower
Singapore 658065
Tel: 6570 0969 Fax: 6515 9526
Operations Office:
31 Jurong Port Road, Jurong Logistics Hub,
#02-25/26
Singapore 639525
Tel: 6846 0301 Fax: 6861 8159

Website: <http://www.dap.com.sg>
E-mail: customerservice@dap.com.sg

LETTER OF AUTHORISATION

To whom it may concern,

We, DAP Asia Pacific (S) Pte Ltd (company's name), _____ (Co Reg.

No.) are the registered owner of the vehicle YP2127A (license plate number).

The vehicle is insured by Ally Insurance (insurance company).

We DAP Asia Pacific (S) Pte Ltd (company's name), hereby authorize

our employee Mr/ Ms. Raguathan Ashok (employee's name) to drive

our vehicle on 05/07/2019 (date of accident) for delivering cargo for clients

_____ (purpose for vehicle was
being used at time of accident).

If you have any questions concerning this matter, please contact me using the information
provided below.

Company Name: DAP Asia Pacific (S) Pte Ltd

Company Reg No.: 200408711H

Contact number: 6570 0969

Signature (with company stamp): _____

