DIRECT CREDIT AUTHORISATION FORM

This form is to be completed by the Supplier of NDA INTERNATIONAL INSURANCE PTE LTO. 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 40 (Name of Paying Organisation)				
Supplier's Particulars:				
Name : AMA AUTOCARE PTE LTD				
Address 36. Toth Guan Road East, #01-36, ENTERPRISE 1818 3636 1968 8998 Fax Number:	HUB SPORE 608580			
Name of Bank :: OCBC Name of Branch: OCBC NoRTH BRANCH				
Account Number To Be Credited: 712500446001				
I/We hereby authorise NDIA INTERNATIONAL INSURANCE PTE LTD 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 delivered to you. You may in your absolute discretion terminate this arranger my/our address last known to you.	revoked it by notice in writing ment by written notice delivered to			
In the event of a change of bank account, I/we shall inform you in writin change.	ng 2 weeks in advance before the			
(B) To: OCBC (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.	0 4 NOV 2019			
Signatures and Company's stamp As In Bank Account	Date			
Part II (To Be Completed By Supplier's Bank)				
To: NOIA INTERNATIONAL INSURANCE PTE LTD (Name of Paying Organisation)				
Without responsibility on the part of the Bank or the signing officer, we particulars agree with that in our files. The account number to be presented follows:	e confirm that the signature/other I in the Interbank Giro format is as			
Bank Branch Account Number				
7339 712 500446001				
Los Yin' Fan. 8552 OCEC Bank	0 4 NOV 2019			
Name & Signature of Authorised Bank Officer	Date			



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST. Reg. No. M2-0078806-X 64 | Cecil Street | #04 | #05 | #06-02 | 10B Building | Singapore 049711 Office (65) 63476100 Email insure@iii.com.sg Fax (65) 62244174 Website www.fl.com.sg

EXPRESS SETTLEMENT

<u>DISCHARGE VOUCHER</u> III-Direct Settlement (PODS)

India Ref: TP / MCT19080386 Claimant Ref : SLL3836E

We/I,AMA AUT		AND CONTRACTOR OF THE PROPERTY	we/I have reached an agreement	
	Surveyor of India International Insurance Pte Ltd			
	respect to the amount claimed for S\$ 3,200.0			
rental), S\$ 7.45 (search fee), vehicle no. SLL3836E that was damaged pursuant to the accident which occurred				
	(date) atGEYLANG LOR 19 TOWARDS GEYLANG ROAD			
vehicle). This is pu	rsuant to the inspection conducted on 20/08/2019 (d	ate) at "the workshop"		
VAT- (I manufilms thank	we/l are/am authorized by the owner LIM S	IM GUAN	("the third party	
	Well dicidili dalilonzed by the officer		A STATE OF THE STATE OF	
claimant") of vehicle no. <u>SLL3836E</u> to make the claim as set out in the above paragraph and we/l have full authority to settle the matter on his/her behalf in a manner that we/l deem fit. We/l enclose herein the letter of authority given by "the third				
party claimant".				
We/I further confi	rm that we/l will indemnify India International Insural	nce Pte Ltd for all d	amages, 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 <u>SLL3836E</u> (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.				
o .	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.			
dispute arising ou	torthe same.			
We/I authorize you to pay the total amount of S\$ 4,007.45 to AMA AUTOCARE PTE LTD				
Dated this 4th	day of			
	CAMERICA			
CLAIMANT:	(Haliferticos) 5)	WITNESS:		
Signature:		Signature:		
	Signed by the workshop" (with chop)		Signed by appointed Surveyor	
Name:	AMA AUTOCAKE PTE LTD	Name:	LKK Auto Consultants Pte Ltd	
NRIC:	207555F10K	NRIC:	199607198R	
Address:	36, TOH GWAM RD BAST,	Address:	51 Ubi Avenue 1	
	#DI-36, FN (ERPRISE HUS		#01-25 Paya Ubi Ind. Park S(408933)	
N I - M EA	Spore 608580	Nationality		
Nationality:		Nationality:		
Occupation:		Occupation:		