

India International Insurance Pte Ltd
64 Cecil Street
#04-00/#05-00 IOB Building
Singapore 049711

Attn: Motor Claims Dept

Dear Sir/ Madam

**ACCIDENT INVOLVING VEHICLE NO SKF5993P AND SHD3154D ALONG
PARAGON SHOPPING CENTRE DRIVEWAY TO BIDEFORD RD ON 13/10/2019**

We understand that you are the insurer of SHD3154D vehicle.

We are instructed by the owner of motor vehicle SKF5993P to write, negotiate and settle the claim on their behalf for the abovementioned accident. We therefore propose to claim from you as follows: -

1.	Cost of repair	S\$ 4,750.00
2.	Loss of Use (4days x \$100.00)	S\$ 400.00
3.	LTA/GIA Search fee	S\$ 7.45
4.	Towing Fee	S\$ -
TOTAL		<u>S\$ 5,157.45</u>

Please let us have your reply soonest possible.

Thank you.

Yours faithfully



Signed by "the workshop"
(with chop)



Date: 13/10/19

To: M/s Leang Automotive
No. 1 Kaki Bukit Avenue 6
#01-68
Singapore 417883

LETTER OF AUTHORITY & INDEMNITY

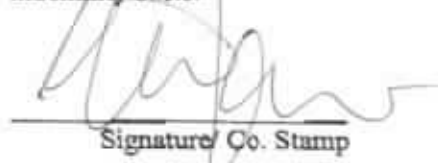
I/We 116 TZE LI ELAINE NRIC No./ Co Registration No. S7871746G of (address) 11 SERVOIS CLOSE #12-23(S)249107 the registered owner (or his/her/their/agent) of motor vehicle registration no. SKE5993P hereby authorise M/s Leang Automotive ("the Repairer") to commence repairs to my/our vehicle and to forward the claim for inter alia the costs of repairs to the owner/insured of the Third Party responsible for the said accident on (date) 13/10/2019 involving motor vehicle nos 8HD3154D along Paragon Shopping Centre Driveway To Rideford Rd I further authorise M/s Leang Automotive to sign and execute all documents in my name including but not limited to the Discharge Voucher in connection with the claim against the Third Party

However, if the third party rejects liability for whatever reasons and/or if the claim is reverted to my/our insurers and my/our insurers do not settle the repair costs and disbursements under my/our own insurance policy, I/we will be fully responsible for the repair costs and disbursements.

I also agree that if I do not fully co-operate in the Third Party claim, I will be responsible for any losses incurred by my Repairer.

My/our vehicle is repaired by the Repairer on my/our own free will and without any threat, inducement and/or promise.

In the event that the Repairer is compelled to enforce this undertaking, I/we agree that I/we shall pay for the legal costs incurred by the Repairer on a solicitor and client full indemnity basis.


Signature/ Co. Stamp



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST Reg. No. M2-007806-X
 64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711
 Office (65) 63476100 Email insure@iil.com.sg
 Fax (65) 63244174 Website www.iil.com.sg

EXPRESS SETTLEMENT

DISCHARGE VOUCHER

III-Direct Settlement (PODS)

India Ref: MCT19100323
 Claimant Ref: SKF5993P

We/I, Leang Automotive ("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\$ 5,150.00 (Global Sum) ~~(Repair cost) of~~ ~~SGD 5,150.00~~ ~~SGD 5,150.00~~ vehicle no. SKF5993P that was damaged pursuant to the accident which occurred on 13/10/2019 (date) at Paragon Shopping Centre Driveway to Bideford Rd (location) involving vehicle no. SHD3154D (insured vehicle). This is pursuant to the inspection conducted on 17/10/2019 (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner NG TZE LI ELAINE ("the third party claimant") of vehicle no. SKF5993P 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 SKF5993P (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\$ 5,150.00 to Leang Automotive

Dated this 09 day of 01 2020

CLAIMANT:

Signature:

Name:

NRIC:

Address:

Nationality:

Occupation:

Signed by "the workshop" (with chop)

46 KEON LEANGS 7220470HBLK 988A Jurong West
S193 #18-625 (S) 641988

WITNESS:

Signature:

Name:

NRIC:

Address:

Nationality:

Occupation:

Signed by appointed Surveyor

LKK Auto Consultants Pte Ltd199607198R81 Ubi Avenue 1#01-25 Paya Ubi Ind. Park S(408933)

No. 1476

Auto Bay @ Kaki Bukit 1 Kaki Bukit Ave 6 #01-68 Singapore 417883
Tel: 6909 3048 Fax: 6909 3046

Vehicle No: SKF5993P

M/s III, India International Insurance
Pte Ltd.

Vehicle Model: Bmw x1

Date: 23-10-2019

Quantity	DESCRIPTION	Unit Price	\$ Amount	cts
	Repair Costs		\$4750	
E & O.E		TOTAL \$	\$4750	

Authorised Signature

For LEANG AUTOMOTIVE

Enquire Vehicle & Owner Information (Vehicle No. SHD3154D As At 13 Oct 2019 / 16:45:00)**Law Firm Search Details**

Search Reason: Insurance claim in relation to traffic accident

Law Firm Case No.: LEANGAUTO-SKF5993P

Current Owner Details

Owner ID Type: Company

Owner ID: 199303871R

Owner Name: COMFORT TRANSPORTATION PTE LTD

Registered Address Type: Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House No.: 383

Registered Street Name: SIN MING DRIVE

Registered Unit No.: -

Registered Building Name: GAS BUILDING

Registered Postal Code: 575717

Current Vehicle Details

Vehicle No.: SHD3154D

Make Description/Model: HYUNDAI / I40 1.7 CRDI FL AT ABS AIRBAG 4DR

Insurance Company Name: INDIA INT'L INS PTE LTD