

# Erofia Motor Trading Pte Ltd

1 Kaki Bukit Avenue 6 #02-62  
AutoBay @ Kaki Bukit  
Singapore 417883  
Tel: 67527740 Fax: 67528669  
Co Registration No: 201202259N

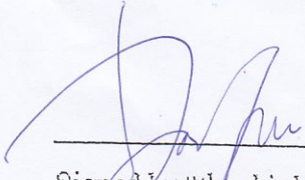
## AUTHORISATION TO ACT


I/We, Dezee Oliver O'Brien ("the third party claimant") of  
Blk 63 Lorong 5 Toa payoh #02-298 S 310063 (address), owner of  
FP 4365R (vehicle no.) hereby authorize Erofia Motor Trading Pte Ltd ("the  
workshop") to act for me with respect to my claim for repair costs and/or rental and/or loss of  
use ("claim") for my vehicle no. FP 4365R That was damaged pursuant to the  
accident which occurred on 22 06 2020 (date)  
along Lorong 4 Toa payoh (location) involving vehicle no/s  
S4 7950 U. ("the accident").

I further authorize the workshop to settle my above mentioned claim in a manner that they  
deemed fit and the workshop is further authorized to receive payment further to settlement of my  
claim with payment cheque/s being made in favour of the workshop - EROFIA MOTOR  
TRADING PTE LTD

I further acknowledge that any settlement the workshop may reach on my behalf is on a without  
prejudice and without admission of liability basis insofar as the driver/owner/insurers of the  
other vehicle/s is concerned.

Dated this 06 (day) of 07 (month) 20 20 (year)

  
Signed by "the third party claimant"  
(With company stamp if applicable)

  
Signed by "the workshop"  
(With company stamp)



Provide always that this discharge of my  
claim for damages relating to the damage to  
my vehicle shall not prejudice or affect or  
preclude me from making a further claim for  
general and special damages for my personal  
injuries sustained in the same accident.



### DISCHARGE RECEIPT

CLAIM REFERENCE : D20002531MFSH  
ACCIDENT DATE : 22/06/2020 22:40  
ACCIDENT LOCATION : T JUNC OF LOR 4 TOA PAYOH AND TOA PAYOH CENTRAL  
INSURED : COMFORT TRANSPORTATION PTE LTD  
INSURED DRIVER : NG AIK SOON  
INSURED VEHICLE : SH7950U  
INVOLVED PARTY : FP4365R  
SETTLEMENT SUM : **\$1,420.00**

I/We, the undernoted CLAIMANT being the person/entity entitled to receive the compensation in relation to the accident, hereby agree to accept the SETTLEMENT SUM as full and final settlement of all claims for damages, costs & disbursements arising out of the ACCIDENT, and I/WE also agree that the said settlement sum:

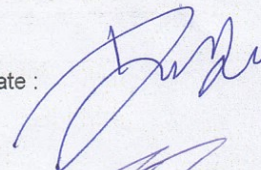
1. is paid without admission of liability on the part of MS First Capital Insurance Limited and/or its INSURED and/or its INSURED DRIVER in respect of the said loss and for damage whether now or hereafter to become manifest,

2. is accepted by me/us to the intent that the said MS First Capital Insurance Limited and /or its INSURED and/or its INSURED DRIVER be absolutely and finally discharged from all claims whatsoever which I/WE now or hereafter may have arising out of or connected with or traceable to the said accident.

I/WE acknowledge that this DISCHARGE RECEIPT is not to be construed as an admission of liability on the part of MS First Capital Insurance Limited and/or its INSURED and /or its INSURED DRIVER and it shall not be used as evidence in any claims or actions which may be made against them or any of them.


CLAIMANT : **DEZEE OLIVER O'BRIEN**

Signature and Date :

 31-3-22

WITNESS : *Teo Hwa Heng*

Signature and Date :

 31-3-22