

iShare Auto Pte. Ltd.
Co. Reg No: 201939376R
8 Kaki Bukit Avenue 4
#08-09 Premier @ Kaki Bukit
Singapore 415875

Tel: 6341 6789 Fax: 6341 6778 Email: ishareauto@gmail.com

Authorisation To Act

I, Koh Hui Min, Angeline ("	the third party claimant") of
1, Koh Hui Min, Angeline ("BLK 222 Ang Mo Kio Avenue 1 # 10-713	Singapore 560222
(address), owner of SMX 8889 U	(vehicle no.)
(address), owner of SMX 8889 U hereby authorise iShare Auto Pte. Ltd.	("the workshop")
to act for me with respect to my claim for repair co	
loss of use ("claim") for my vehicle no.	x 8889 U that was
damaged pursuant to the accident which occurred on at/along AYE towards Tuas (After South Bu	23/11/2020 (date)
(location) involving vehicle no/sSLZ_45S	("the accident").
I further hereby authorise the workshop to settle my above me they deem it fit and the workshop is further authorised to receive of my claim with payment cheque/s being made in favour of the latest authorise the workshop to execute and/or evouchers/agreements regarding my/our claim/case for my/our of latest acknowledge that any settlement the workshop may reprejudice and without admission of liability basis in so far as as me and/or the driver/owner/insurers of the other vehicle/s ariconcerned.	we payment further to settlement workshop. sign any documents/discharge convenience. each on my behalf is on a without my other claim (s) whatsoever by
Dated this day of (month)	20 (year)
Signed by "the third party claimant"	Signed by "the workshop"



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Letter of Authorisation & Indemnity

Accident	involving motor vehicles no	SMX 8889 U	and SLZ	45 S on _	23/11/2020	
at/along	AND Louis J.	Tuas (After	South Buor	na Vista Ro	ad Exit)	
1.	1/We, the Owner of ishave Auto Ptg		SMX 888	hereby	instruct and authorise endent surveyor on my/ou	
	behalf to inspect my/our mo	tor vehicle and to comm	ence repairs immedi	ately to the said moto	r vehicle in accordance with	
	the report of the independer you the sum of \$ I				d party, I/we forthwith pay	
2.	You are further authorised to made and instructions are given	o appoint solicitors on m ven by me/us with respe	y/our behalf and to i ct to the conduct of	nstruct the solicitors f my/our claim against t	he third party driver and/or	
3.	his insurers including if neces You have my/our full author					
4	the third party and/or his ins			nouths as massaction	a manias fram mulaur thire	
4.	My/Our solicitors shall also a party claim directly to you aff				n monies from my/our third	
5.	Upon resolving my/our clair					
	professional costs and disbubalance of the settlement sur				and make payment of the	
6.	I/We undertake and agree t					
	hereby consent and authoris steps to recover the claim fro			ience legal proceeding	gs and to take all necessary	
7.	I/we also hereby instruct an			e claim monies receiv	ed from the third party al	
8.	outstanding balances that are In the event that I/we am/					
0.	instructions on the accident					
-	I/we shall render my/our full					
9.	In the event that my/our cla my/our claim procedure incl					
	settlement is not honoured	or satisfied by the third	party and/or the thi	rd party and/or his ins	surers make an offer to pay	
	less than the amount claimed					
	bill and survey fees and any costs and disbursements the					
10.	I/we shall keep you informed	d of any correspondence				
	pay or receive any monies due to this claim.					
		211	1.5	20		
	Dat	ted this 24 da	y of 20	20		
	1/	1				
	()	19 C		On		
	e of vehicle owner					
Name : _	Koh Hui Min, A	ngeline		Witnessed by :		
IC/UEN N	s 8937395	F		wiche	de	
(Company stamp, if applicable)						
Address: BLK 222 Ang Mo Kio						
Avenu	e 1 # 10 - 713 Singa	pore 560222				
Tel: 9187 8984						



"My execution of this Discharge Voucher is only for my claim for property damage and not prejudicial to any other claims"

AUTHORIZATION TO ACT (AIG Asia Pacific - Express Third Party Claim)

I, Koh Hui Min, Angeline ("the third party claimant")
of BLK 222 Ang Mo Kio Avenue 1 #10-713 Singapore 560222 (address),
owner of Smx 8889 U (vehicle no.) hereby authorize iShave Auto 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 noSMX 8889 Uthat was damaged pursuant to the
accident which occurred on
Tuas (After South Buona Vista Road Exit) (location)
involving vehicle no/sSLZ 45 S
("the accident").
I further authorize the workshop to settle my above mentioned claim in a manner that they deem 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.
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 day of (month) 20 (year)
(REG. NO. C. C. 201939976R) C.
Signed by "the third party claimant" Signed by "the workshop" (with chop)