LETTER OF AUTHORISATION

I/We, Chua Cher Sian	("claimant") of
850 Yishun Ove 6 #04-04 8768961 (addr	ess), owner of (Vehicle no.) _ SFX 972
	CENTRE PTE LTD ("the workshop") to act
for me with respect to my claim for repair cos	sts and/or rental and/or loss of use ("claim") for
my vehicle no. SFX932 that was da	maged pursuant to the accident which occurred
on 10 06 7072 (date) along CTE 101	uavds sie (location)
involving vehicle no/s SHC 779×J ("th	e accident").
I further authorize the workshop to settle my	above-mentioned claim in a manner that they
deem fit, and the workshop is further authorize	red to receive payment further to the settlement
of my claim with payment cheque/s being mad	le in favor of the workshop.
	workshop may reach on my behalf is without asis insofar as the driver/owner/insurers of the
Dated this (day) of (month) (year)
Signed by "the claimant" (With chop if applicable)	Signed by "the workshop" (With chop)