REQUEST FOR FULL SETTLEMENT AMOUNT

Dated:	
То:	
Full Settlement Department	
Vehicle No.:	
Agreement No.:	
Dear Sir/Madam,	
This is to inform you that I have solo	d the above-mentioned vehicle to
settle the H.P account relating to th Attention: Officer-in-charge	ne above vehicle.
 Please fax the full settlement 	ment amount due on DATE nt amount to FAX NoNAME
Contact No.:	HP/Office NO.
Yours faithfully,	
	Karamatan Kar
Name of hirer: Identification No.: Contact No.:	