



A401709-018

TO : Hsiao Tong

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLH 2005P (Insd veh)	Model: Renault Latitude (1995cc)
	SHD 411G (TP veh)	
Date of Accident/ Time:	02/09/2017	

Repair Estimate	: \$		
Final Repair Cost	: \$	909.50	
Loss of use / LOI	: \$	100.00	2 days at \$50.00 per day
Rental (if any)	: \$	207.20	2 days at \$103.60 per day
LTA / GIA Search Fee	: \$	5.35	
Others:	: \$	-	
	: \$		
Final Settlement Sum	: \$	1,222.05	
Payee Name : Trans-cab Auto Services Pte Ltd			
Is Third Party Workshop GIA Registered? [X] YES [] NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)	
B)	For GIA Registered Workshop:	BOLA Applicable: Yes Yes BOLA Scenario No: <u>27</u>	
	BOLA Liability: <u>100</u> (%)	Assessed Liability (*): _____ (%)	
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.			
Remarks:			

NOTE:

1. PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
2. THIS SETTLEMENT IS ON A WITHOUT PREJUDICE BASIS AND SHOULD NOT CONSTRUED AS AN ADMISSION OF LIABILITY ON AXA AND THEIR CLIENT/TORTFEASOR IN ANY MANNER WHATSOEVER.
3. AXA RESERVES THEIR RIGHTS UNDER THE POLICY TERMS & CONDITIONS AS WELL AS THEIR RIGHTS IN LAW.

Only applicable to rental claim - All document are to be submitted with this settlement confirmation. In the event, rental agreement / invoices are **not received within 7 days** of this signed confirmation, we will automatically revert to loss of use claim per the NIMA rates.

We/I confirmed that this is a **full and final settlement** that we and or our client have/had/has against you (AXA and their policyholder/authorised driver/tortfeasor) for any and all losses (past/present/future) arising from this accident.

We confirmed that we have the authority of our client to act for and on their behalf in this accident.



Signature of workshop representative / Workshop stamp

Name of Representative:

Date: -2 MAY 2019

Jasmine Tan

Signature of Witness / Workshop stamp (if applicable)

Name of Witness:

Date:

Ng Wai Yin
G2815702P

07 MAY 2019

Signature of AXA's surveyor/representative:

Name of AXA's surveyor /Representative:

Date: