



A90 1301 - 091

## AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SJA6778B (Insd veh)	Model: TOYOTA CROWN
	SHC5406U (TP veh)	
Date of Accident/ Time:	08/01/2013 @ 1215HRS	

Repair Estimate	: \$		
Final Repair Cost	: \$	528.00	
Loss of Use	: \$	50.00	1 days at \$50 per day
Rental (if any)	: \$	81.82	1 days at \$81.82 per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	400.00	
Payee Name : TRANS-CAB AUTO SERVICES PTE LTD			
Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES [ ] NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)	
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/NO BOLA Scenario No: <u>NIL</u>	
	BOLA Liability: _____ (%)	Assessed Liability (*): <u>50</u> (%)	
* 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/TORTEASOR 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 to act for and on their behalf in this accident.

Signature of workshop representative / Workshop stamp  
Name of Representative: NG WA' YIN  
Date: 13/12/14

Signature of Witness / Workshop stamp (if applicable)  
Name of Witness: Amenda Tay  
Date: 13/12/14

Signature of AXA's surveyor/representative:  
Name of AXA's surveyor /Representative:  
Date: