

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	FBM 2671H (Insd veh)			
	SLC 6860L	(TP veh)	Model: TOYOTA ALTIS	
Date of Accident/Time:	31/01/2018		**************************************	

Repair E	stimate	:\$	12,756.01	
Final Rep	pair Cost	:\$	4,494.00	(W/GST)
Loss of U	Ise	:\$		days at \$ per day
Rental (i	fany)	:\$	400,00	4 days at \$ 100,00per day
LTA / GIA	Search Fee	:\$	31.00	- days at 5 (00,00per day
Others:		:\$		
		\$		
Final Settlement Sum		\$	4,900.00	GLOBAL SUM (ALL-IN)
Payee Na	ame: TORQUE 5 F	TE	TD	OLOBAL GOIN (ALL-IIV)
Is Third F	Party Workshop GIA Registered?		/] YES [] NO (Kindly indicate be	elow)
4)	For Non GIA Registered W	orksl	nop: Agreed Liability	(%)
3)	For GIA Registered Workshop:		BOLA Applicable: Yes/ No-	BOLA Scenario No: 27
	BOLA Liability: 100	(%)	Assessed Liability (*):	
	* Assessed Liability to be fil	led o	nly for chain collisions and for cases where BOL	
		Acres 1		ACCOUNT OF THE PARTY OF THE PAR

NOTE:

- 1. PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
- 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 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 32 Work KAB VON

Date: 17/10/19

Signature of Witness / Workshop stamp (if applicable)

Name of Witness: Gucu

Date: 17/10/19

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

Date:

my execution of this Discharge Voucher is only for my claim for property damage and not prejudicia to any other claims arising from the same accident.