



Sulj

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	XB 8440R	(Insd veh)	Model: MERCEDES-BENZ
	SG 5516J	(TP veh)	
Date of Accident/ Time:	19/01/2018		

Repair Estimate	: \$		
Final Repair Cost	: \$		
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
	: \$		
Final Settlement Sum (Global Sum)	: \$	7,900.00	
Payee Name : SMRT BUSES LTD			
Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES <input type="checkbox"/> 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>100</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/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: 04.10.2019



Signature of Witness / Workshop stamp (if applicable)
Name of Witness: BALACH
Date:

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

AUTHORISATION TO ACT

I/We, **SMRT BUSES LTD** ("the third party claimant") of **6 ANG MO KIO STREET 62 (S)569140** (address), owner of **SG 5516J** (vehicle no.) hereby authorize **SMRT AUTOMOTIVE SERVICES PTE LTD** ("the workshop") to act for me with respect to my claim for repair costs and/or rental and/or loss of use ("claim") for my vehicle no. **SG 5516J** that was damaged pursuant to the accident which occurred on **19/01/2018** (date) along **YISHUN RING RD AFT BS:59561 BLK 798** (location) involving vehicle no/s **XB 8440R** ("the accident").



I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of SMRT BUSES LTD.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Dated this 04 (day) of 10 (month) 2019 (year)



Signed by "the third party claimant"
(with chop if applicable)



Signed by "the workshop"
(with chop)