

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	FBD 1445Z	(Insd veh)	CHEVROLET EPICA 2.0DSL
	SHD 454H	(TP veh)	Model: AT ABS D/AB 2WD 4DR
Date of Accident/ Time:	31/03/2018 09.40		TURBO

A) B)	For Non GIA Registered Wo BOLA Liability: 100		and a supplication of the	BOLA Applicable: Yes/ Name Assessed Liability (*):	BOLA Scenario No: 27
	For GIA Registered Wo			BOLA Applicable: Yes/ N	BOLA Scenario No: 27
A)	For Non GIA Registered				
	For Non GIA Registered Workshop:			Agreed Liability	(%)
	ame: TRANS-CAB AUTC Party Workshop GIA Registere		YES [NO (Kindly indicate	below)
	Final Settlement Sum :\$ 6, Payee Name : TRANS-CAB AUTO SERVICE			D	10 por 10
		:\$			And the second of the second o
Others:		: \$			A Market Hard Control B at 1900 and M 1900 a
LTA / GIA	Search Fee	:\$	7.45		A CONTRACTOR OF THE PROPERTY O
Rental (if any)		:\$	451.50		6 days at \$75.25per day
Loss of the Income Token Sum		:5	300.00		6 days at \$50.00per day
THEAT PARTY	air Cost (W/GST)	: 5	5,992.00		
Clasting	timate	:\$	22,028.55		

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 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: Amada Tay

Date:

18/06/20

KSC

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

Date: 19/06/2020

Name of Witness: Lxwx 7m 5
Date: 18 JUN 2020

Signature of Witness / Workshop stamp (if applicable)

AXA Insurance Pte Ltd (Company Reg. No.: 199903512M) 8 Shenton Way #24-01 AXA Tower Singapore 068811 AXA Customer Centre #01-21/22 Telephone: +65 6880 4888 — axa.com.sg