

## **AXA THIRD PARTY DIRECT SETTLEMENT**

Vehicle No:	No: XE3281A			(Insd veh)	Model: HONDA CB400 F2J				
	FW1953I	FW1953B							
Date of Accident/ Time:	ime: 09/05/2018								
Repair Estimate	www.max.	:\$						<b>A</b>	
Final Repair Cost		:\$	4,000.00						
Loss of Use		:\$	100,00			4	days at \$ 25.00	per day	
Rental (if any)		:\$	_				days at \$	per day	
LTA / GIA Search Fee		:\$	_						
Others:		:\$	_						
		;\$							
Final Settlement Sum		:\$	4,100.00						
Payee Name : SG 98 MOTOR I	PTE LTD	I							
Is Third Party Workshop G	A Registered	? [	] YES	[X] NO	(Kindly indicate be	elow)			
A) For Non GIA Registered Workshop: Agr				Agreed	Liability100	(%)			
B) For GIA Registered Workshop:				BOLA A	pplicable: Yes/ No	BOLA Sc	enario No:		
BOLA Liability:(%)				Assesse	Assessed Liability (*):(%)				
* Assessed	Liability to be	filled	only for chain	collisions and fo	or cases where BOL	A does no	ot apply.		

## NOTE:

Remarks:

- 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: Pare 10

Date: \$\int 1117219

Signature of Witness / Workshop mp (if applicable) Name of Witness:

Date:

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

Date:

injuries sustained in the same accident. general and special damages for my personal preclude me from making a further claim for my vehicle shall not prejudice or affect or claim for damages relating to the damage to Provided always that this discharge of my

## AUTHORIZATION TO ACT

I, Rastus Chow Yong 6n ("the third party claimant")
of Blk 5018 Yishun St 51#07-474 8762501 (address),
owner of <u>fw 1953B</u> (vehicle no.) hereby authorize
SG 98 Motor Ptc Ud
("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. FW 1953B that was damaged pursuant to the
accident which occurred on 952018 (date) along
Junction of Tanah Merah Coast Rd / Charge (location)
involving vehicle no/s XE 3281 A
("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 the workshop.
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 (month) 20 16 (year)
QTE LTD QC QC QC QC QC QC QC QC QC QC
Signed by "the third party claimant" Signed by "the workshop"
owalter of one current party crimmine ardited by the Morkshop.