

## AXA THIRD PARTY DIRECT SETTLEMENT

/ehicle No:	SLQ 1247S (Insd veh)		
	SKV 3249J (TP veh)	Model:	
Date of Accident/ Time:	03/07/2018		

	* Assessed Liability to be filled only for chain collision							
В)	For GIA Registered W	ability: 100 (%)			BOLA Applicable: Yes/ No BOLA Scenario No: 27  Assessed Liability (*): (%)			
A)		n GIA Registered Workshop:		Agreed Liability		·	7	
	arty Workshop GIA Registe		X ] YES [ ]		dicate below)			
Payee Na								
Final Settlement Sum		:\$	1,828.40					
		:\$						
Others:		:\$						
LTA / GIA	Search Fee	:\$			2.00			
Rental (if	any)	:\$				days at \$	per day	
Loss of Use		:\$	200.00			02 days at \$100.00 per da		
Final Repa	air Cost	:\$			1,626.40			
Repair Est	timate	:\$						

## 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 again.

Signature of workshop representative / Workshop stamp

Date: 05/08/2019

Name of Representative: S10W +1001

Signature of Witness Workshop stamp (if applicable)

Name of Witness:

Daniel A Jude

Date:

P10x/80/20

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