



### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	FBL 1602U (Insd veh)	Model: KIA / cerato k3 1.6A Sx
	SGZ 1193A (TP veh)	
Date of Accident/ Time:	04/07/2018	

Repair Estimate	: \$	6,479.92	
Final Repair Cost	: \$	3,659.40	
Loss of Use	: \$	120.00	02 days at \$ 60.00 per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$	2.00	
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	3,781.40	
Payee Name : Cycle & Carriage Fulco Motor Dealer Pte 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/ <del>No</del> BOLA Scenario No: <u>27</u>	
	BOLA Liability: <u>100</u> (%)	Assessed Liability (*): _____ (%)	
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.			
Remarks:			

#### NOTE:

- 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.
- 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: Ler Yeong Cherng  
Date: 19/8/19



Signature of Witness / Workshop stamp (if applicable)  
Name of Witness: RENEE BACAN  
Date: 19/08/19



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