

## AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	PZ 1311U (Insd veh)		
	SJS 9199H (TP veh)	Model: MERCEDES BENZ A180	
Date of Accident/Time:	12/09/2018		

Repair Estimate	0.5	24,059.47		
Final Repair Cost	0.5			
Loss of Use	\$		7 days at \$50.00 per day	
Rental (If any)	:\$		days at S per day	
LTA / GIA Search Fee	\$			
Others:	15			
	1.5			
Final Settlement Sum	:\$	5,600.00	(GLOBAL SUM)	
Payee Name : MG SO Is Third Party Workshop G	LUTION PTE LTD IA Registered? [ ] Yi	S [X] NO (Kindly indicate below	w)	
A) Far Non G	For Non GIA Registered Workshop:		Agreed Liability 100 (%)	
B) For GIA Re	gistered Workshop:	BO LA Applicable: Yes/NO Bi	BOLA Applicable, Yes/NO BOLA Scenario No: 22	
BOLA Liabi	BOLA Liability: (%) Assessed Liability (*) (%)		(%)	
* Assessed	Liability to be filled only for c	ain collisions and for cases where SOLA i	does not apply.	
Bernarks:	11 780 97 572		PYHO	

## 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 action

Signature of workshop representative Workshop stamp
Name of Representative: WWW.S.Y.HWM

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

Date:

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

Date: 20/04/2020

(TAX) TIME

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