



WITHOUT PREJUDICE to:
(a) Insurance Subrogated Claim and/or
(b) Any Personal Injury Claims
(Note: This Notice supersedes any inconsistencies found in this Discharge Voucher)

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLF 8224U (Insd veh)	Model:
	SGH 2063E (TP veh)	
Date of Accident/ Time:	12/10/2018 @ 0930 HOURS	

Repair Estimate	: \$	12,386.50	
Final Repair Cost	: \$	4,800.00	8 days at \$ 100 per day
Loss of Use	: \$	800.00	days at \$ per day
Rental (if any)	: \$	-	
LTA / GIA Search Fee	: \$	-	
Others:	: \$	-	
	: \$	-	
Final Settlement Sum	: \$	5,600.00	

Payee Name : LC AUTOMOTIVE

Is Third Party Workshop GIA Registered? ☐ YES ☐ NO (Kindly indicate below)

A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/ No BOLA Scenario No: _____
	BOLA Liability: _____ (%)	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:
Date:



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

Chan Pizk Yuen

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