



AAD1810-387

## AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SHD670A (Insd veh)	Model: RENAULT LATITUDE-2.0 L (A)
	SHC5473A (TP veh)	
Date of Accident/ Time:	29/10/2018	

Repair Estimate	: \$		
Final Repair Cost (W/GST)	: \$	13,161.00	
Loss of Use	: \$	—	days at \$ per day
Rental (if any)	: \$	811.68	8 days at \$ 101.46 per day
LTA / GIA Search Fee	: \$	—	
Others:	: \$	—	
Final Settlement Sum	: \$	13,972.68	

Payee Name : TRANS-CAB AUTO SERVICES PTE LTD

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: 5

BOLA Liability: 100 (%) 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/TORTEASOR 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: NG WAI YIN  
 Date: 06 DEC 2019

Signature of Witness / Workshop stamp (if applicable)  
 Name of Witness: Amanda Tay  
 Date: 06/12/19

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