

## WITHOUT PREJUDICE to:

(a) Insurers' Subrogated Cleim and/or (b) Any Personal Injury Claims [Note: This Notice supersades any Inconsistencies found in this. Discharge Voucher]

## AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLD 68S (Insd veh)	
	SGB 5588U (TP veh)	Model: BMW 520I (1998cc)
Date of Accident/ Time:	04/12/2018	

All and				7				
	* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.							
	BOLA Liability:100(%)			Assessed Liability (*): 0 (%) Type text he				
3)	For GIA Registered Workshop:			BOLA Applica	ble: Yes/ <del>No</del>	BOLA So	enario No: 28	
4)	For Non GIA Registered Workshop:			Agreed Liabi	ity	(%)		
is inira P	Party Workshop GIA Register	ed? [	X] YES [ ]	NO (Kin	dly indicate b	elow)		
	ame: MBM Wheelpower			No tu				
		20,742.67						
Et al Car	11	:\$			10-27-1999			
Others:	(Towing Fee)	:\$	130.00					
LTA / GIA Search Fee		;\$	2.00					
	fany) w/GST	:\$	1,348.20			7	days at \$ 180	per day
Loss of U		:\$					days at \$	per day
Final Rep	pair Cost W/GST	:\$	19,262.47					
	stimate	:\$	57,524.91	A CONTRACTOR OF THE PARTY OF TH				

## 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 accident.

Signature of workshop representative / Workshop stamp

M (wi

Name of Representative:

Date: 13/08/2020

Signature of Witness / Workshop stamp (if applicable)

Name of Witness: Siew Theng

Date: 13.04.20

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

Date: 14/08/2020