AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	GBE8519T	(Insd veh)	
	SJV2984M	(TP veh)	Model: PROTON PERSONA-1.6 (A)
Date of Accident/ Time:	08/01/2019		

Repair Estimate	: $		
Final Repair Cost	: $		
Loss of Use	: $		days at $ per day
Rental (if any)	: $		days at $ per day
LTA / GIA Search Fee	: $		
Others:	: $		
	: $		
Final Settlement Sum (Global Sum)	: $	8,600.00	

Payee Name : QUAN DE MOTOR TRADING

Is Third Party Workshop GIA Registered?   [   ]   YES   [X]   NO   (Kindly indicate below)

A)	For **Non GIA Registered Workshop:**	Agreed Liability __100__ (%)
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:

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.

QUAN DE MOTOR TRADING
1 Kaki Bukit Avenue 6
#01-67 Autobay, Singapore 417883
HP: 9670 9191
Signature of workshop representative / **Workshop stamp**
Name of Representative:
Date:

QUAN DE MOTOR TRADING
1 Kaki Bukit Avenue 6
#01-67 Autobay, Singapore 417883
HP: 9670 9191
Signature of Witness / Workshop stamp (if applicable)
Name of Witness:
Date:

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