



The acceptance of this offer is without prejudice to any personal injury claim/insure's claim/expenses

### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SHD 9234S (Insd veh)	Model: HONDA CIVIC TYPE R
	SKM 6661D (TP veh)	
Date of Accident/ Time:	16/01/2019	

Repair Estimate	: \$	3,336.67.	
Final Repair Cost	: \$		( W/GST)
Loss of Use	: \$		03 days at \$ 80.00 per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
Final Settlement Sum	: \$	2,400.00	GLOBAL SUM (ALL-IN)
Payee Name : MOVA AUTOMOTIVE PTE LTD			
Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES [ ] NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)	
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/ <del>No</del> BOLA Scenario No: <u>27</u>	
	BOLA Liability: <u>100</u> (%)	Assessed Liability (*): _____ (%)	
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.			
Remarks:			

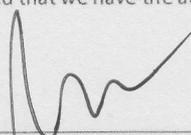
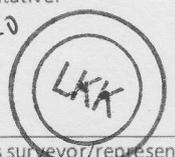
**NOTE:**

- 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.

<p> Signature of workshop representative / Workshop stamp Name of Representative: Date: <u>14/1/2020</u></p> <p></p> <p> Signature of AXA's surveyor/representative: Name of AXA's surveyor / Representative: Date: <u>16/01/2020</u></p>	<p> Signature of Witness / Workshop stamp (if applicable) Name of Witness: Date: <u>14/1/2020</u></p> <p>MOVA AUTOMOTIVE PTE LTD Bik 1008, BUKIT MERAH LANE 3 #01-04 (S) 159722 Tel: 62723892 Fax: 62708314 GST Reg No : M2-0088864-2</p>
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