AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLC 2292C	(Insd veh)	Model: AUDI Q5	
	SDG 7611G	(TP veh)		
Date of Accident/ Time:	13/02/2019 / 18:30			

Repair Estimate	: $			
Final Repair Cost	: $	8,098.62	(W/GST)	
Loss of Use	: $	400.00	4	days at $ 100.00 per day
Rental (if any)	: $			days at $ per day
LTA / GIA Search Fee	: $	2.00		
Others:	: $			
	: $			
Final Settlement Sum	: $	8,500.62		

Payee Name : PREMIUM AUTOMOBILES 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: 27
	BOLA Liability: 100 (%)	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.

Signature of workshop representative / Workshop stamp
Name of Representative: Nova Khai
Date: 04|09

Signature of Witness / Workshop stamp (if applicable)
Name of Witness: Lim Kee Seng
Date: 04|09

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