

This Discharge Voucher applies only to the claimant's claim for his property damage and will not affect his personal injuries claim and/or uninsured losses claim in a later date. Further, the settlement terms herein should not be used as an Evidence to prejudice to the claimant's personal injuries claim and/or other uninsured losses claim arising of the subject matter in this sction.

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLL 2603S	(Insd veh)		MITSUBISHI COLT PLUS
	SLS 7052L	(TP veh)	Model:	
Date of Accident/ Time:	01.03.2019			

	* Assessed Liability to	o be filled	only for chain collisions a	nd for cases where BO	LA does no	t apply.	
BOLA Liability:(%)		Assessed Liability (*):(%)					
3)	For GIA Registered Workshop:		ВО	A Applicable: Yes/ No	BOLA Sc	enario No:	
4)	For Non GIA Registe	Non GIA Registered Workshop:		eed Liability	(%)		
	arty Workshop GIA Registe			O (Kindly indicate b	elow)		
Payee Na	me: KIM CHWEE AL	JTO PT	= LTD				
Final Settlement Sum :		:\$	3,612.00				
		:\$					
Others:		:\$					
LTA / GIA	Search Fee	:\$	2.00			00/3 00 3 100	per da
Rental (if	any)	: \$	400.00		4	days at \$ 100	
Loss of U	se	:\$	0,210.00			days at \$	per day
Final Rep	air Cost GST	:\$	3,210.00				
wehau ra	timate	: \$					

NOTE:

- 1. 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.
- 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: TANG JUN ZHONG Date: S8704986H	Signature of Witness / Workshop stamp (if applicable) Name of Witness: Date:
Signature of AXA's surveyor/representative:	

Date:

Name of AXA's surveyor /Representative: