

(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:	GBC7891J	(Insd veh)		
	SKT7823K	(TP veh)	Model: TOYOTA WSH-1.8 X (A)	
Date of Accident/ Time:	04/03/2019			

vehau cz	timate	:\$				
Final Repa	air Cost (W/GST)	:\$	5,403.50			
Loss of Us	e	:\$	-	days at \$ per day		
Rental (if	any)	:\$	770.40	6 days at \$ 128,40 per day		
LTA / GIA	Search Fee	:\$	2,00			
Others:	4 - 25 - 6 - 38 - 1 - 1 - 1 - 1	:\$	-			
		:\$				
Final Settlement Sum		:\$	6,175.90			
Payee Na	me : MBM WHEELPOWER PTE LTD					
Is Third Pa	arty Workshop GIA Registered	? [\	/] YES [] NO (Kindly indicate belo	w)		
A)	For Non GIA Registered	Norksh	op: Agreed Liability	_(%)		
3)	For GIA Registered Work	shop:	BOLA Applicable: Yes, No B	OLA Scenario No: _27_		
7)			4 (11.1.11) (*)	Assessed Liability (*):(%)		
?)	BOLA Liability:100	_(%)	Assessed Liability (*):	(%)		
·)			Assessed Liability (*): nly for chain collisions and for cases where BOLA o			

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.

Date: 05-12-19

Signature of Witness / Workshop stamp (if applicable)
Name of Witness: Show Then

Date: 05 ml

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

Date: