



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SME 3099R [Insd veh]	Model: Hyundai I40 (1685cc)
	SHC 3163H [TP veh]	
Date of Accident/ Time:		

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)	: \$	1,080.00

Payee Name : ComfortDelGro Engineering 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 Yes 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.

Signature of workshop representative / Workshop stamp
 Name of Representative: **COMFORTDELGRO ENGINEERING PTE LTD**
 Date: **8.7.19**
80 LOYANG DRIVE
SINGAPORE 508668

Signature of Witness / Workshop stamp (if applicable)
 Name of Witness: **COMFORTDELGRO ENGINEERING PTE LTD**
 Date: **8.7.19**
80 LOYANG DRIVE
SINGAPORE 508668

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

Please forward your cheque made payable to:
COMFORTDELGRO ENGINEERING PTE LTD

*"The contents of this document apply to vehicle damages only
 All personal injuries and damages arising therefrom are excluded
 from the ambit and application of this document"*