

*** 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 action.

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:		SJF9592Z (Insd veh)							
		SFW7788Y (TP veh)			Model: BMW 645CI-4.4 (A)				
Date of Accident/ Time:		25/05/2019							
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)		:\$	11,500.00						
Payee Na	me : KIM CHWEE AUTO PT	ELTD							
Is Third P	arty Workshop GIA Register	ed?	[/] YES [] NO	(Kindly	indicate below)			
A)	For Non GIA Registered Workshop: Agreed Lie				Liability	bility(%)			
B)	For GIA Registered Workshop: BOLA Appl					Yes No BOLA	Scenario No: 2	8	
	BOLA Liability: 100 (%) Assessed				d Liabilit	ty (*):0	(%)		
	* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.								
Remarks:			Marie II (1991 in the State of						

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.

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Signature of workshop representative / Workshop stamp
Name of Representative: TANG JUN ZHONG

Signature of Witness / Workshop stamp (if applicable)

S8704986H

Name of Witness: Tang Kok Wee I/C: S7709513F

Date: 03/10/15

·CKS

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

Date: