



\*\*\* 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:	SJT 3730H	(Insd veh)	Model: HONDA CIVIC
	SJF 5641S	(TP veh)	
Date of Accident/ Time:	05/06/2019 / 23.30		

  

Repair Estimate	: \$		
Final Repair Cost (W/GST)	: \$	5,350.00	
Loss of Use	: \$		
Rental (if any)	: \$	500.00	days at \$ per day
LTA / GIA Search Fee	: \$	2.00	5 days at \$ 100.00 per day
Others:	: \$		
Final Settlement Sum	: \$	5,850.00	
Payee Name :	KIM CHWEE AUTO PTE LTD		(global sum)
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: _____	
	BOLA Liability: _____ (%)	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:

Date: 17/07/19

TANG JUN ZHONG  
S8704986H

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

Date:

Signature of AXA's surveyor/representative:

Name of AXA's surveyor /Representative:

Date: