

*** 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)	
	SJF 5641S	(TP veh)	Model: HONDA CIVIC
Date of Accident/ Time:	05/06/2019 / 23:30		

	* Assessed Liability t	o be filled or	nly for chain col	lisions and	l for cases wher	e BOLA does	not apply.		
BOLA Liability: (%)			Asses	Assessed Liability (*):(%)					
For GIA Registered Workshop:			BOLA	BOLA Applicable: Yes/ No BOLA Scenario No:					
A) For Non GIA Registered Workshop:			Agree	Agreed Liability(%)					
Is Third Par	ty Workshop GIA Registe	ered? [/] YES [] NO	(Kindly indic	ate below)			
Payee Nam	e: KIM CHWEE A	UTO PTE LTD		/					
Final Settlement Sum		:\$	5,850.00		9-		(global sum)		
		:\$		Z.					
Others:		:\$							
LTA / GIA Se		:\$	2.00						
Rental (if an		:\$	500,00		·			100.00 per day	
Loss of Use		:\$		7			days at \$	per day	
Final Repair	Cost (W/GST)	:\$	5,350.00						
Repair Estin	nate	:\$	23,599	.28					

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

Date:

Name of Representative:

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

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

Date: 1907 19