

## Torque 5 Pte Ltd

No.8 Kaki Bukit Ave 4, Premier @ Kaki Bukit, #01-49 Singapore 415875 Tel: +65 6452 4457 | Fax: +65 6452 4584

Co. Reg. No.: 201313221G

### AXA INSURANCE SINGAPORE PTE LTD

8 Shenton Way #27-01 AXA Tower Singapore 068811

# Tax Invoice

Invoice No. Invoice Date : T51910002 : 17/10/2019 : 02/07/2019

Ref Currency Terms Veh No

: SGD : 30 Days : SLZ6093M

#	Desription	Qty	UOM	U/P	Disc	Amt
	TO SUPPLY SPARE PARTS AND LABOUR FOR ACCIDENT					
1.	REPAIR PARTS LUMP SUM AMOUNT	1.00		3250.00	0.00	3250.00

Subtotal: \$3,250.00

\$ 227.50

Total: \$3,477.50

I agree to the price as listed above and affirm that the goods are received in good condition.

For Revolution Automotive Pte Ltd

(Authorised Signature)

(Customer's Signature and Company Stamp)



Vehicle No:

#### AXA THIRD PARTY DIRECT SETTLEMENT

EKETOOSE (Inch noh)

\$ per day			
\$ 120.00 per day			
,			
lo:			
Assessed Liability (*):(%)			

#### 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.

Signature of workshop representative / Workshop stamp

Name of Representative: WON 6 FAR VUN
Date: 9/10/19

tamp sigi

Signature of Witness / Workshop stamp (if applicable)

Name of Witness: Lucas Chow

Date: 17/10/19

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

Date: