



### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLM5842T (Insd veh)	Model: TOYOTA COROLLA ALTIS 1.6 AUTO
	SJR5613K (TP veh)	
Date of Accident/ Time:	19/07/2019	

Repair Estimate	: \$		
Final Repair Cost (w/GST)	: \$	2,728.50	
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$	800.00	8 days at \$ 100.00 per day
LTA / GIA Search Fee	: \$	7.45	
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	3,535.95	

Payee Name : 98 MOTORSPORTS 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: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No BOLA Scenario No: 27
	BOLA Liability: 100 (%)	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.

*[Handwritten Signature]*



Signature of workshop representative / Workshop stamp  
Name of Representative:  
Date:

*[Handwritten Signature]*



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

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