



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SKK 2363B (Insd veh)	Model: RENAULT LATITUDE
	SHD 9840S (TP veh)	
Date of Accident/ Time:	06/08/2019	

Repair Estimate	: \$	65,213.49	
Final Repair Cost	: \$		
Loss of Use Token Sum	: \$		3 days at \$50.00 per day
Rental (if any)	: \$		3 days at \$81.13 per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
Final Settlement Sum	: \$	6200.00	(GLOBAL SUM)
Payee Name : TRANS CAB AUTO SERVICES PTE LTD			
Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)	
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/ No BOLA Scenario No: <u>15</u>	
	BOLA Liability: <u>100</u> (%)	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 **authorisation** of our client to act for and on their behalf in this accident.

 Signature of workshop representative / Workshop stamp Name of Representative: <u>NG WA I YIN</u> Date: <u>01 JUL 2020</u>  	 Signature of Witness / Workshop stamp (if applicable) Name of Witness: <u>Amanda Tay</u> Date: <u>01/07/20</u>
Signature of AXA's surveyor/representative: Name of AXA's surveyor /Representative: Date: <u>02.07.2020</u>	