



WITHOUT PREJUDICE to:
 (a) Insurers' Subrogated Claim and/or
 (b) Any Personal Injury Claims
 [Note: This Notice supersedes any
 inconsistencies found in this
 Discharge Voucher]

AXA THIRD PARTY DIRECT SETTLEMENT

| | | |
|-------------------------|----------------------|------------------------|
| Vehicle No: | SML 1821Z (Insd veh) | Model: HYUNDAI ELANTRA |
| | SMC 9022H (TP veh) | |
| Date of Accident/ Time: | 16/10/2019 | |

| | | | |
|---|----------------------------------|--------------------------------------|----------------------------|
| Repair Estimate | : \$ | 12,229.82 | |
| Final Repair Cost | : \$ | 1,876.06 | W/GST |
| Loss of Use | : \$ | 240.00 | 6 days at \$ 50.00 per day |
| Rental (if any) | : \$ | | days at \$ per day |
| LTA / GIA Search Fee | : \$ | 2.00 | |
| Others: | : \$ | | |
| | : \$ | | |
| Final Settlement Sum | : \$ | 2,118.06 | |
| Payee Name : RAAIM CAR BODYWORKS PTE LTD | | | |
| Is Third Party Workshop GIA Registered? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (Kindly indicate below) | | | |
| A) | For Non GIA Registered Workshop: | Agreed Liability | 80 (%) |
| 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:

- 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 to act for and on their behalf in this accident.

Signature of workshop representative / Workshop stamp
 Name of Representative:
 Date: 11/05/2020

Signature of Witness / Workshop stamp (if applicable)
 Name of Witness:
 Date: 11/05/2020

Signature of AXA's surveyor/representative:
 Name of AXA's surveyor /Representative:
 Date: 11/05/2020

