

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SGV 3018G (Insd veh)		
	SKM 2230R (TP veh)	Model: SUBARU FORESTER	
Date of Accident/ Time:	25/06/2018		

Repair Estin	nate	:\$	5.548.14
Final Repair	Cost	:\$	1,521.63 / (W/GST)
Loss of Use		;\$	days at \$ per da
Rental (if an	ny) (W/GST)	;\$	235.40 / 2 days at \$117.70per da
LTA / GIA Se	earch Fee	:\$	2.00 /
Others:		:\$	
		:\$	
Final Settler	ment Sum	;\$	1,759.03 /
Payee Name	e: MOTOR IMA	GE ENT	PRISES PTE LTD
Is Third Part	ty Workshop GIA Registere] YES [] NO (Kindly indicate below)
A)	For Non GIA Registere	d Works	p: Agreed Liability
8) For GIA Registered Wo		rkshop:	BOLA Applicable: Yes/No BOLA Scenario No: 27
	BOLA Liability: 100	(%)	Assessed Liability (*):(%)
	* Assessed Liability to I	e filled	ly for chain collisions and for cases where BOLA does not apply.
			TOTAL THE CONTRACT OF THE CONT

NOTE:

- 1. PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
- 2. 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.

FUU Signature of workshop representative / Workshop stamp Name of Representative: 001 SIOW 4001

Date: 01 09 2020

Name of Witness: Noor AISHA Date: 01/09/2020

Signature of Witness / Workshop stamp (if applicable)

KSC

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

Date: 02/09/2020