

*** This Discharge Voucher applies only to the claimant's claim for his property damage and will not affect his personal injuries claim and/or uninsured losses claim in a later date. Further, the settlement terms herein should not be used as an Bvidence to prejudice to the chimant's personal injuries claim and/or other uninsured losses claim arising of the subject matter in this action.

AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SHA 1303U (Insd veh)	
	SJS 285B (TP veh)	Model: TOYOTA VELLFIRE 240Z A
Date of Accident/ Time:	08/03/2021	

Repair E	***************************************	:\$	54,893.10
Final Rep		:\$	
Loss of U	Ise	:\$	days at \$ per
Rental (in	f any)	:\$	days at \$ per
LTA / GIA	\ Search Fee	:\$	
Others:		:\$	
		:\$	
Final Set	tlement Sum (Global Sum)	:\$	18,600.00
Payee N	ame:FASTECH AUTO P	TE LTI	D
	Party Workshop GIA Registere] YES [X] NO (Kindly indicate below)
4)	For Non GIA Registered	d Works	hop: Agreed Liability 100 (%)
)	For GIA Registered Workshop:		BOLA Applicable: Yes/ No BOLA Scenario No:
	BOLA Liability:	(%)	Assessed Liability (*):(%)
	* Assessed Liability to b	e filled o	only for chain collisions and for cases where BOLA does not apply.

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.
- 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:

23/04/2021

Signature of Witness / Workshop state (if applicable)

Charles !

Name of Witness: Allan

Date: 23/04/2021

Date:

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

Date: 23/04/2021