Several techniques have evolved for definitive radiation therapy of breast cancer using independent set of collimators and a single set-up point. These techniques do not require complex rotation of collimators, couch and beam splitters to achieve uniform dose across the tangential breast fields and supraclavicular field. A perfect match-line with these techniques is possible only when the asymmetric jaws have zero alignment tolerance and patients have no setup uncertainties. In this paper, we examine the effect of setup uncertainties, which have Gaussian distribution with FWHM of 4.7 - 11.8 mm. A measured non-divergent beam profile from 6MV X-ray used for breast treatments was convoluted with these distributions. Convoluted beam profiles were used to estimate the dose across field junction with mechanical tolerances of independent collimator jaw alignment of 0±2mm. Our analyses show dose variation across the coplanar tangent and supraclavicular fields is ±20%. Larger systematic errors in the mechanical tolerance of collimators increase dose non-uniformity and larger stochastic setup errors decrease it approximately by half. The dose uniformly across the match plan of two non-divergent fields is improved by decreasing systematic errors, tighter mechanical tolerance of collimators or by moving match plane. Even though larger stochastic setup error improve the dose uniformity at the match plane, yet that should not be the method of choice.