15/5/2010

INS. CASE OWNER: ~~Yingstorey~~ CC4 /AXA1601 8353, K1~~9~~63 ✓

LKK:
IDAC:

ASSIGNMENT

Surveyor: Kalvin DOI: 28/9/16 Date / Time: 28/9/16
Registered in Merimen: 28/9/16

Pre-assign / CCU / FTE

Insured Vehicle No. : YL 7616B
Claim No. : C0401746
Name of Insured : WORLD TRADE AGENCIES P/L
Policy No. : VLC/P1587759.
Insured Tel No. : HP:
Make / Model : NISSAN
Excess Sec II :S$ D.O.A: 26/9/16
Place of Accident : WHITLEY TRAFFIC LIGHT TWDS STEVEN R
Is driver the owner? (YES / (NO)) Nature of Accident :
If **NO**, Driver Name / Age : HARON BIN SAPDON
OI GIA REPORT: (YES) / NO ; TP GIA REPORT: (YES) / NO
Driver Tel No. : (V/L: (YES) / NO)
Insured Liability : % **Final ? Yes / No**

SMB 108J → →

INSRS:
WSP:
Tel : SMRT.
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
27/10/16	SMB108J - Y YL7616B - X
Yng	
31/10/16 @ 2:00	Spoken with OI Company in charge. She requested us to email officially sent to her company. She will check with her boss & let us know. Informed her TP reported they have in car camera & we have requested them to provide us.
31/10/16 @ 2:20	Gmail sent to OI Company.
18/9/18 File review (Olivia)	check if OI received letter? Offer up to 50/50. Costly exercise. → Follow up with OI / seek AXA approval for 50 liability. / send email to OI L/x 50 ↓ Stanley
	RECEIVED 2 3 MAY 2018
06-12-18	BASED ON POSITION OF IMPACT; THE LIABILITY IS TO BE SHARED EQUALLY

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	Y 31/10/16
After call ltr to OI:	Y

Documentation Check List:	Handler	Typist
Notification ltr (if non-pickup)		
After call ltr to OI:	✓	
Authorisation To Act:		
Release Voucher:		
Final Repair Bill:	✓	
Car Rental Invoice:		
Towing Invoice		
LTA / GIA :	✓	
Medical Bill:		
PIR:		
Mandate/Reject Instruction:	✓	
LOD	✓	
Payment Breakdown Form:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE Date/Time: Sent By:

Confirm by:

FINALIZATION Date/Time: Confirm with:
Repair Cost: S$ (days) Reduction: %
Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 19/6/19 Confirm with Karan
Email ✓ Call ☐
Final Liability: % 90 (Agreed / (Assessed)) BOLA S/N No. : Nil
If NO or B 28, Ass. Lia :
Repair Cost: 1450 S$ 1305.00
Loss of Rental (LOR): S$ — (— days)
Loss of Use (LOU): 137.50 S$ 123.75 ($275 x 0.5 days)
Loss of Income (LOI): S$ — ($ x days)
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ **[Tick only one]**

COPY SENT 20/6/19

GIA/LTA Search S$ 5.00
Medical: S$ —
Disbursement: S$ — (e.g. Tow/ Independent)
Legal Cost S$ —
Total: S$ 1433.75 **Global Sum S$:** 1430.00

1) Claim status: (Normal)/Reject/Private Settle
2) Report Format: TP
3) Survey fee: $350/-

FINAL PAYMENT Date/Time: Confirm with:
Email ✓ Call ☐
Payee 1: S$ 1430.00 Name 1: SMRT Buses Ltd
~~Payee 2: (Strike if N.A.)~~ S$ Name 2:
~~Payee 3: (Strike if N.A.)~~ S$ Name 3: