13/5/2018

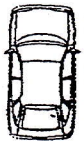
INS. CASE OWNER: Stacey Ng | CC 4 / ASM1800 2108 / S ha39 | LKK: SMART | IDAC:

ASSIGNMENT

Surveyor: SEBASTIAN | DOI: 05/03/18 | Date / Time: 2/2/2018

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : GW 6589A | Claim No. : S8M 00899

Name of Insured : LEE KENG SOO | Policy No. : GPA81667

Insured Tel No. : HP: 98477597 | Make / Model : T. ULTIMA

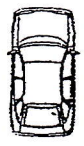
Excess Sec II :S$ | D.O.A : 07/02/18 | Place of Accident : PIE TO CITY

Is driver the owner? (YES / NO) | Nature of Accident :

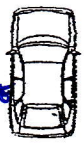
If NO, Driver Name / Age : | OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : | (V/L: YES / NO) | Insured Liability : % | Final ? Yes / No

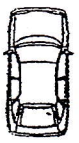
SFF 2818 S → → →



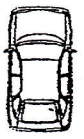
INSRS:
WSP:
Tel :
Liability : PML PERFORMANCE
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SFF 2818 S - X ; GW 6589 A - X
26/2	
26/2	- TP CCTV FOOTAGE IN. V DRIVER/VIC/SFF 2818S.
	- SHOWED OI OKID & REAR-ENDED TP
26/02/18	- AXA INSTRUCTED TO DO DD & C&W OI.
	- FORWARDED TP CCTV TO AXA VIA SMART CLAIM.
27/02/18	- FILE REVIEWED. OI LOST CONTROL & REAR-ENDED TP. SEND LETTER TO OI.
@ 10:03AM	- SPOKE TO OI. HE CONFIRMED ACCIDENT DETAILS. HE OKIDOED & HIT TP. INFORMED TP CLAIM, AGREED TO SETTLE & ADVISE NCD ISSUES.
	- EMAIL LIABILITY CLEAR.
	- TO FINALISE COR.
	- FINALISED.
	- ORIGINAL TP LOD IN.
04/05/18	- TYPE REPORT FOR MANDATE APPROVAL.
04/07/18	- AXA APPROVED MANDATE. SEND ACCEPTANCE.
	- ALL DOCS IN ORDER TO CLOSE.

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	
After call ltr to OI:	27/02/18 - VIC

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:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: P/P S$ 5,919.75 (5 days) Reduction: 35 % Email [ ] Call [ ]

FINAL SETTLEMENT Date/Time: 11/07/18 Confirm with CAROLINE Email ✓ Call [ ]

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: (w/GST)	S$ 6,354.13	(OI OKIDOED & REAR-ENDED TP)
Loss of Rental (LOR): w/GST	S$ 6,200 (4 days) X $1550.00	
Loss of Use (LOU):	S$ — ($ x days)	
Loss of Income (LOI):	S$ — ($ x days)	
LOR only ✓ LOU only [ ]	LOR + LOU [ ] LOR + LOI [ ] [Tick only one]	
GIA/LTA Search	S$ 200	
Medical:	S$ —	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ — (e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ —	3) Survey fee: $350.00
Total:	S$ 6,978.13 **Global Sum S$:** —	

FINAL PAYMENT Date/Time: Confirm with: Email [ ] Call [ ]

Payee 1:	S$ 6,978.13	Name 1:	PERFORMANCE MOTORS LIMITED
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—