15/5/2010

INS. CASE OWNER: ~~TE~~ KST | CC 4 / ASM1800 2887 / U ~~xra35~~ | IDAC: 30517

ASSIGNMENT

Surveyor: CKS | DOI: 13/7/18 | Date / Time: 12/02/18

Registered in Merimen:

Pre-assign / CCU / FTE: GBG 1459 T

Insured Vehicle No. :	GBG 1459T	Claim No. :	S8M 00852 / 30517
Name of Insured :	CHEN DYNASTY MARKETING	Policy No. :	VCA/P19/70889
Insured Tel No. :	HP:	Make / Model :	KIA K2500
Excess Sec II :S$	D.O.A : 9/7/18	Place of Accident :	MANDAI ESTATE
Is driver the owner?	(YES / NO) (NO circled)	Nature of Accident :	
If NO, Driver Name / Age :	KALI PALAMS MY	OI GIA REPORT: YES / NO (YES circled) ; TP GIA REPORT: YES / NO (YES circled)	
Driver Tel No. :	97235161 (V/L: YES / NO) (YES circled)	Insured Liability : %	Final ? Yes / No

GBE 7593 J →

INSRS: WSP: chin meng. Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
21/6	GBE 7593J - CS / TM1 1701681 / KIGhn7 ; DOA 29/8/19
MAN	GBG 1459 T - X
14/6/19	Confirm accident details inform TP claim letter send out pending PIR.
3/7/19	Seek mandate via SMART.
19/11/19	- ORIG. TP LOD IN - AXA IN VIEW TO RESOOT TP CLAIM. - EMAIL TO TP TO RESOOT CLAIM - TO CLOSE.

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	14/6/19
After call ltr to OI:	Vivian

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:		

Close Case V.C Vin

PRELIMINARY ADVICE Date/Time: 14V Sent By: 19-11-19

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: S$ (days) Reduction: % Email Call

FINAL SETTLEMENT Date/Time: Confirm with Email Call

Final Liability:	% (Agreed / Assessed) BOLA S/N No. : NW	If NO or B 28, Ass. Lia :
Repair Cost:	S$ –	RESOOT TP CLAIM
Loss of Rental (LOR):	S$ – (days)	TP LIKELY MOVED OUT
Loss of Use (LOU):	S$ – ($ x days)	FROM GPS ROAD
Loss of Income (LOI):	S$ – ($ x days)	
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S$ –	
Medical:	S$ –	1) Claim status: Normal/Reject/Private Settle (Reject circled)
Disbursement:	S$ – (e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ –	3) Survey fee: $350.00
Total:	S$ – Global Sum S$:	

FINAL PAYMENT Date/Time: Confirm with: Email Call

Payee 1:	S$ –	Name 1:	–
Payee 2: (Strike if N.A.)	S$ –	Name 2:	–
Payee 3: (Strike if N.A.)	S$ –	Name 3:	–

COPY SENT