15/5/2010

INS. CASE OWNER: ICC | CC 4 / ASM 1800 9437 / K ha3 | LKK: IDAC: 47203

ASSIGNMENT

Surveyor: KSC DOI: 30/6/18 Date / Time : 7/05/2018

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : SJZ 3403 X Claim No. : SSM00140

Name of Insured : Lim Chong Koon Policy No. : GA13242/1

Insured Tel No. : HP: 98787191 Make / Model : 7. Altis

Excess Sec II :S$ D.O.A : 21/05/2018 Place of Accident : Maju Ave

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**

SLH45T →

INSRS: WSP: Complete VMS Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
6/6 VIC	SLH45T x ; SJZ 3403 X - X - Rubbing Ms. - FINALISED. - TP LOD IN BY EMAIL
25/07/18 @ 2:30PM	- SPOKE TO OI. HE CONFIRMED ACCIDENT DETAILS & HIT PARKED TP. INFORMED HIM OF TP CLAIM, AGREED TO SETTLE & ADVISE NCD ISSUES. SEND LETTER TO OI.
25/07/18	- TYPE REPORT FOR MANDATE
28/08/18	- SEEK MANDATE APPROVAL TO AXA
01/09/18	- AXA APPROVED MANDATE
10/09/18	- SEND LET OFFER TO TP
24/01/19	- TP ACCEPTED OFFER - 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:	25/07/18 - VIC
After call ltr to OI:	

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: 5/7/18 Sent By: [signature]

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: L/S S$ 3,250.00 (4 days) Reduction: 39 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 24/01/19 Confirm with LILY Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia : COI HIT STATIONARY TP)
Repair Cost: (w/GST)	S$ 3,477.50	
Loss of Rental (LOR):	S$ 720.00 (4 days) x $180	
Loss of Use (LOU):	S$ — ($ x days)	
Loss of Income (LOI):	S$ — ($ x days)	
LOR only ✓ LOU only ☐	LOR + LOU ☐ LOR + LOI ☐ [Tick only one]	
GIA/LTA Search	S$ 7.45	
Medical:	S$ —	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ — (e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ —	3) Survey fee: $350.00
Total:	S$ 4,204.95 **Global Sum S$:** 4,200.00	

FINAL PAYMENT Date/Time: Confirm with: Email ☐ Call ☐

Payee 1:	S$ 4,200.00	Name 1:	COMPLETE VMS PTR LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—