

15/5/2010

INS. CASE OWNER:

CC 4 / AXA1800

LKK:

IDAC:

Surveyor:

TAMMICH

DOI:

ASSIGNMENT

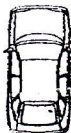
01/06/18

Date / Time :

11/6/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

S17 87524

Name of Insured :

WMM XINZHAN

Insured Tel No. :

HP:

98769550

Excess Sec II :S\$

D.O.A :

27/5/18

Is driver the owner?

(YES / NO)

Nature of Accident :

Claim No. :

SMMOITS / 48574

Policy No. :

CW8AL672

Make / Model :

TUYON

Place of Accident :

ORANGE ROAD 400TS RO
LEFT TURN

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

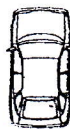
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability :

%

Final ? Yes / No

SMB 35650



INSRS:

WSP:

Tel :

Liability :

RMKS:

Tower
Transit

INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/Time		STAGE	DATE / PIC
4/6/18	SMB35650 - X	Non-Reporting ltr (1st):	
		Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	
		After call ltr to OI:	
		Documentation Check List: Handler	Typist
		Notification ltr (if non-pickup)	
		After call ltr to OI:	
		Authorisation To Act: DOKA	
		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:

S\$

(

days) Reduction:

%

Email ☐ Call ☐

FINAL SETTLEMENT

Date/Time:

Confirm with

LYNN

Email ☒ Call ☐

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No. :

15

If NO or B 28, Ass. Lia :

Repair Cost: (w/loss)

S\$

2,140.00

COI

CHANGING LINE

Loss of Rental (LOR):

S\$

(

days)

Loss of Use (LOU):

S\$

900.00 (\$300 x 3 days)

Loss of Income (LOI):

S\$

(\$ x days)

LOR only ☐ LOU only ☒LOR + LOU ☐LOR + LOI ☐

[Tick only one]

GIA/LTA Search

S\$

2.00

Medical:

S\$

-

1) Claim status: Normal/Reject/Private Settle

Disbursement:

S\$

-

(e.g. Tow/Independent)

2) Report Format:

Legal Cost

S\$

-

3) Survey fee:

4350.00

Total:

S\$

3,042.00

Global Sum S\$:

-

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☐ Call ☐

Payee 1:

S\$

3,042.00

Name 1:

TOWER TRANSIT SINGAPORE PTE LTD

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

-

Payee 3: (Strike if N.A.)

S\$

-

Name 3:

-