15/5/2010

INS. CASE OWNER: JMS | CC 4 ASM /~~AXA~~1800 Q426 / TY63

LKK:

IDAC:

ASSIGNMENT

Surveyor: TAUMKH DOI: 01/06/18 Date / Time : 1/6/18

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : SLZ8752G Claim No. : SGM00175 / 48379

Name of Insured : WANG XIUJUAN. Policy No. : LN8916672.

Insured Tel No. : HP: 98769550. Make / Model : TOYOTA

Excess Sec II :S$ D.O.A : 27/5/18 Place of Accident : ORCHARD RD AFT SCOTTS RD

Is driver the owner? (YES / NO) Nature of Accident : LEFT TURN.

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**

SMB3565C →

INSRS:
WSP: Tower Transit
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
1/6/18	SMB3565C - X SLZ8752G - Y
JMY.	Smartclaim
4-10-18	EMAILED TP FOR ESTIMATE.
2-11-18	PEND TP EST FOR IA.
	- TP LOD IN BY EMAIL
20/11/19	- UPLOAD MANDATE IN GC
27/11/19	- AXA APPROVED MANDATE.
	- SEND 1ST OFFER TO TP.
	- 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:	
After call ltr to OI:	

Documentation Check List:	Handler	Typist
Notification ltr (if non-pickup)		
After call ltr to OI:		
Authorisation To Act: NO RTA		
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: 27/11/19 Confirm with LYNN Email [✓] Call [ ]

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 15	If NO or B 28, Ass. Lia : (CO1 CHANGED LANE)
Repair Cost: (W/GST)	S$ 2,140.00	
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: $350.00
Total:	S$ 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:	—