15/5/2010

INS. CASE OWNER: Jas | CC 4 / ASM / AXA1801 0408, K2263 92 | LKK: | IDAC:

ASSIGNMENT

Surveyor: DGC DOI: 11/6/18 Date / Time: 7/6/18

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : SBC 7711X Claim No. : S8MOO71A / 50323

Name of Insured : CHAN MEI LEE Policy No. : P2078365

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

Excess Sec II :S$ D.O.A : 7/6/18 Place of Accident : SHEARES AVE / MARINA BLVD.

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

If **NO**, Driver Name / Age : YAP WEN OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

SLX 7271U → → →

INSRS: WSP: Esteem. Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SLX 7271U-X SBC 7711X-Y
8/6/18 TTN	# Smart claim
	- PMC ~~FOLLOWED~~. OI REAR-ENDED TP. SEND EMAIL TO OI.
	- MANDATE APPROVED
	- 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:	07/06/18 - TT

Documentation Check List:	Handler	Typist
Notification ltr (if non-pickup)		
After call ltr to OI: EMAIL	✓	
Authorisation To Act:	✓	
Release Voucher: DS FORM	✓	
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: PP S$ 2,252.76 (3 days) Reduction: 65 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 4-7-18 Confirm with CARMEN Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia : COI (REAR-ENDED TP)
Repair Cost: GJT	S$ 2,410.45	
Loss of Rental (LOR):	S$ 233.85 (3 days) 77.95	COPY SENT 16/7/18
Loss of Use (LOU):	S$ (S x days)	
Loss of Income (LOI):	S$ (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: $350.00
Total:	**S$** 2,651.75 **Global Sum S$:** —	

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

Payee 1:	S$ 2,651.75	Name 1: ESTEEM PERFORMANCE PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2: —
Payee 3: (Strike if N.A.)	S$ —	Name 3: —