

INS. CASE OWNER:

KCC

CC 4, ASM180 11961, Nfa3

LKK:

IDAC:

54788

Surveyor:

Naz

ASSIGNMENT

DOI:

2/1/18

Date / Time:

2/1/2018

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SLP 2677H

Name of Insured:

Ang Hwee Peng Penny

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A:

29/6/2018

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Ang Hwee Keong

Driver Tel No.:

97640707 (V/L: YES / NO)

Claim No.:

88M00MSC

Policy No.:

GA 212240/1

Make / Model:

VOLVO XC90

Place of Accident:

Tot Tuck PLYOVER SUP RD

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

Insured Liability: %

Final ? Yes / No



INSRS:
WSP:
Tel:
Liability:
RMKS:

Car hire 10 days



INSRS:
WSP:
Tel:
Liability:
RMKS:



INSRS:
WSP:
Tel:
Liability:
RMKS:



INSRS:
WSP:
Tel:
Liability:
RMKS:

Date/ Time

STB 6692H. 06/11/1801/447/ AHB392 : 05/11/18
- 03/1/18 173 2288/ 01/11/18 : 07/1/18

SLP 2677H - X

5/3 KC called. Informed TP rep. view engaged independent surveyor.

checked w Cath - naz overlooked the assignment. NO survey done.

21-05-19 TO CANCEL FILE. NO SURVEY DONE

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)	<input type="checkbox"/> <input type="checkbox"/>
After call ltr to OI:	<input type="checkbox"/> <input type="checkbox"/>
Authorisation To Act:	<input type="checkbox"/> <input type="checkbox"/>
Release Voucher:	<input type="checkbox"/> <input type="checkbox"/>
Final Repair Bill:	<input type="checkbox"/> <input type="checkbox"/>
Car Rental Invoice:	<input type="checkbox"/> <input type="checkbox"/>
Towing Invoice	<input type="checkbox"/> <input type="checkbox"/>
LTA / GIA :	<input type="checkbox"/> <input type="checkbox"/>
Medical Bill:	<input type="checkbox"/> <input type="checkbox"/>
PIR:	<input type="checkbox"/> <input type="checkbox"/>
Mandate/Reject Instruction:	<input type="checkbox"/> <input type="checkbox"/>
LOD	<input type="checkbox"/> <input type="checkbox"/>
Payment Breakdown Form:	<input type="checkbox"/> <input type="checkbox"/>
Post-Repair Photos:	<input type="checkbox"/> <input type="checkbox"/>
Others:	<input type="checkbox"/> <input type="checkbox"/>

PRELIMINARY ADVICE Date/Time: _____ Sent By: _____

FINALIZATION Date/Time: _____ Confirm with: _____

Repair Cost: S\$ _____ (_____ days) Reduction: _____ % Confirm by: _____

FINAL SETTLEMENT Date/Time: _____ Confirm with: _____ Email Call

Final Liability: % _____ (Agreed / Assessed) BOLA S/N No. ; _____

Repair Cost: S\$ _____

Loss of Rental (LOR): S\$ _____ (_____ days)

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\$ _____

Medical: S\$ _____

Disbursement: S\$ _____

Legal Cost S\$ _____ (e.g. Tow/ Independent)

Total: S\$ _____

FINAL PAYMENT Date/Time: _____ Global Sum S\$: _____

Payee 1: S\$ _____ Confirm with: _____ Email Call

Payee 2: (Strike if N.A.) S\$ _____ Name 1: _____

Payee 3: (Strike if N.A.) S\$ _____ Name 2: _____

_____ Name 3: _____

- 1) Claim status: Normal/Reject/Private Settle
- 2) Report Format:
- 3) Survey fee:

◀ Service Request Details

Claim
S8M00MSC

Reference
None ✎

Loss Date
June 29, 2018

NuZ

Request Date
July 2, 2018

Due Date
July 9, 2018

Vendor Name
LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss
Third Party Vehicle Damage

Services
Pending verification - Direct Settlement

Actions

Next Step
Agree to perform service

Decline Work

Accept Work

Vehicle Information

Incident Vehicle Registration #
SHB6692H

Make
TPVD MERCEDES-BENZ

Model

B

Service Address

...

Primary Contact/Insured

ONG HWEE PENG PENNY
47 HUME AVENUE, #09-02 PARC PALAIS, 598748, Singapore
97640707
CK@NANOSTAR.SG

Claim Handler

CHAN Kian Chuan
6568804269
kianchuan.chan@axa.com.sg

Additional Instructions

Messages Invoices History Documents Assessment Metrics Notes

New Message

Call Cath SA, check whether Cath
 still call them. Ask if Cath still call
 WJ do survey if they know

Report Remarks Entry - CC4/ASM18011961/Nfa3

Remarks

AXA assign the case to Hek.

Remarks

A informed Hek. Cath also want Hek
 to survey for this case.

Add

Remarks 1	By	On
<input type="checkbox"/> SHB 6692H ; SLP 2677H	HMK	2/7/2018 2:17:47 PM
<input type="checkbox"/> EST : \$ --- SUR : NAZ --- WKSP : CDGE LOYANG	HMK	2/7/2018 2:18:02 PM
<input type="checkbox"/> S8M00MSC // 54788 // KC	HMK	2/7/2018 2:18:13 PM
<input type="checkbox"/> Services Pending verification - Direct Settlement	HMK	2/7/2018 2:18:19 PM
<input type="checkbox"/> 2/7/18 2:09 PM *** LIAB CLEAR *** Message LIAB CLEAR WITH QUANTUM TO BE AGREED. - CHAN Kian Chuan	HMK	2/7/2018 2:18:39 PM
<input type="checkbox"/> 050718 PLS ADVISE ON THE HANDLER FOR THIS MATTER. WE HAD RECEIVED FEEDBACK FROM TP THAT NO SURVEYOR HAD CONTACTED THEM FOR SURVEY DESPITE SURVEY WAS ASSIGNED TO YOU ON THE SAME DAY WE RECEIVED TP CLAIM. PLEASE ADVISE WHAT ACTION WAS DONE WHEN SERVICE ACCEPTED. TP HAD SINCE SELF ENGAGED OTHER SURVEYOR FOR SURVEY.	VAS	5/7/2018 11:23:28 AM
<input type="checkbox"/> 5/7/18 11:27 AM *** Message PLS ADVISE ON THE HANDLER FOR THIS MATTER. WE HAD RECEIVED FEEDBACK FROM TP THAT NO SURVEYOR HAD CONTACTED THEM FOR SURVEY DESPITE SURVEY WAS ASSIGNED TO YOU ON THE SAME DAY WE RECEIVED TP CLAIM. PLEASE ADVISE WHAT ACTION WAS DONE WHEN SERVICE ACCEPTED. TP HAD SINCE SELF ENGAGED OTHER SURVEYOR FOR SURVEY.- CHAN Kian Chuan	HMK	5/7/2018 11:25:06 AM
<input type="checkbox"/> 7/9/18 2:44 PM *** Message RECEIVED TP LOD, FYNA PLS.- CHAN Kian Chuan	HMK	10/9/2018 12:58:56 PM

↳ 2/7/18 @ 1.19pm. Cath watsapps Naz to survey taxi.
 2/7/18 @ 1.22pm Naz replied ok.
 5/7/18 Received call from KC.
 5/7/18 checked in Cath, Naz overlooked assignment.
 7/9/18 → received email from KC - LOD received, FYNA please.