

15/5/2010

INS. CASE OWNER:

Kran/Kuan

CC 6/AXA1801

2409, Ubb3

LKK:

IDAC:

Surveyor:

marcus

DOI:

ASSIGNMENT

21/3/18

Date / Time:

21/3/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SLW 6296K

Name of Insured:

MOHAMMED MOHTAR

Dun MOHO DAK

Claim No.:

S8M000FW / 59M3

Policy No.:

9A374671

Insured Tel No.:

HP:

Excess Sec II : \$

D.O.A.:

21/3/18

Make / Model:

SUZUKI

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age: MOHAMMED SKATHY EN BIN MOHAMMED

Driver Tel No.:

(V/L: YES / NO) MOHTAR

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

Insured Liability: % Final ? Yes / No

Sgy 5033H

INSRS:
WSP:
Tel:
Liability:
RMKS:Lin's
BroINSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:

Date/ Time

21/3/18

VIC

Sgy 5033H

SLW 6296K

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:

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:

06/08/18 @ 10:20AM

PINKETED.

OPONS TO O. OWO WHO HIS SON.
HE CONTINUED ACCIDENT DETAILS &
OLD RATE-ENDED TP. INFORMED TP
CLAIM, AGREED TO SETTLE & AWAKE
NCD ISSUES. OI WANTS TO KNOW
FINAL AMOUNT. SEND LETTER & BULK
TO OI/OH.

UPLOADED W/ MANDATE REQUEST.

ORIGINAL TP LOD IN.

AXA GIVE MANDATE APPROVAL

SEND 1st OFFER TO TP

RECEIVED BY W/ AKA. TP ACCEPTED

OFFER. ALL DOCS IN ORDER.

PRELIMINARY ADVICE

Date/Time:

06/08/18

Sent By:

VIC

FINALIZATION

Date/Time:

Confirm with:

Repair Cost:

L19

S\$ 5,100.00 (6 days) Reduction:

62 %

Confirm by:

FINAL SETTLEMENT

Date/Time:

09/10/18

Confirm with:

202AM

Final Liability:

100

(Agreed / Assessed) BOLA S/N No.:

27

Email

Call

Repair Cost:

S\$ 5,100.00

Loss of Rental (LOR):

S\$

(days)

Loss of Use (LOU):

S\$ 400.00

(S60 x 8 days)

Loss of Income (LOI):

S\$

(S x days)

LOR only ☐ LOU only ☐LOR + LOU ☐LOR + LO ☐

[Tick only one]

GIA/LTA Search

S\$ 7.45

Medical:

S\$

Disbursement:

S\$

Legal Cost

S\$

Total:

S\$ 5,587.45

Global Sum S\$:

—

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$ 350.00

FINAL PAYMENT

Date/Time:

Confirm with:

Payee 1:

S\$ 5,587.45

Name 1:

LUN'S BROTHER AUTO ENGINEERING WORKSHOP

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3: