15/5/2010

INS. CASE OWNER: Vall | CC Y AGM /~~AXA~~1801 3706 / A 663 | LKK: IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 13/08/18 Date / Time : 21/7/18

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : GBF 4758R
Name of Insured : HAI DI LAO HOLDINGS PLC
Insured Tel No. : HP:
Excess Sec II :S$ D.O.A : 19/7/18
Is driver the owner? (YES / NO) Nature of Accident :
If **NO**, Driver Name / Age : GAO MING.
Driver Tel No. : (V/L: YES / NO)

Claim No. : S8MO0BBT | 60643
Policy No. : P0028610
Make / Model : TOYOTA
Place of Accident : OUTSIDE 2 MANDAI LINK

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO
Insured Liability : % **Final ? Yes / No**

GY 4604S →

INSRS:
WSP: ~~Cheng~~
Tel :
Liability : ~~Hoi~~
RMKS: HUA HENG

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
21/7/18 VIC	GY4604S / GBF4758R ? [illegible] DOA: 19/7/18
	A Smartclaim.
15/08/18 @ 2:17PM	- CALL OI COMPANY. SPOKE TO PIC MS LAI. INFORMED HER OF ACCIDENT DETAILS & OI HAD REVERSED & HIT TP. ALSO INFORMED TP CLAIM W NCD. AGREED TO SETTLE & AWARE NCD ISSUE. SEND LETTER & EMAIL TO OI.
	- FINALISED.
20/11/18	- UPLOADED 1A IN SC
	- TP LOD IN BY EMAIL
22/05/19	- UPLOADED MANDATE 1A IN SC
23/05/19	- AXA APPROVED MANDATE
	- SEND 1ST OFFER TO TP.
	- TP ACCEPTED OFFER.
	- ALL DOCS IN ORDER.

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	15/08/18 - VIC
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: DS FORM	✓	

PRELIMINARY ADVICE Date/Time: 20/11/18 Sent By: VIC

FINALIZATION Date/Time: Confirm with: Confirm by:
Repair Cost: LG S$ 1,300.00 (3 days) Reduction: 81 % Email [ ] Call [ ]

FINAL SETTLEMENT	Date/Time: 23/05/19 Confirm with SUNE		Email ✓ Call
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL		If NO or B 28, Ass. Lia : OI (OI REVERSED)
Repair Cost:	S$ 1,300.00		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 450.00 ($150 x 3 days)		
Loss of Income (LOI):	S$ — ($ x days)		
LOR only [ ] LOU only [✓] LOR + LOU [ ] LOR + LOI [ ] [Tick only one]			
GIA/LTA Search	S$ —		
Medical:	S$ —		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ —	(e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ —		3) Survey fee: $350.00
Total:	**S$** 1,750.00	**Global Sum S$:** —	

FINAL PAYMENT	Date/Time:	Confirm with:	Email [ ] Call [ ]
Payee 1:	S$ 1,750.00	Name 1:	HUA HENG SPRAY PAINTING WORKSHOP
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—