15/5/2010

INS. CASE OWNER: RA | CC 4, Asm 180 15306, N fa3 | LKK: b485b
IDAC:

ASSIGNMENT

Surveyor: Nu2   DOI: 23/8/2018   Date / Time: 23/8/2018
Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : SJR 8916 S   Claim No. : S8M 00SYJ
Name of Insured : MS CAR2 LEASING PTL   Policy No. : VFX/8185 7572 Gx
Insured Tel No. : _____ HP: _____   Make / Model : Toyota
Excess Sec II :S$ _____ D.O.A : 20/08/2018   Place of Accident : VICTORIA ST.
Is driver the owner? (YES / NO) Nature of Accident : _____
If NO, Driver Name / Age : Lee Chin Cheng   OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO
Driver Tel No. : 9692 7068 (V/L: YES / NO)   Insured Liability : ___ %   Final ? Yes / No

SLL 192 Z →   →   →   →

INSRS: INSRS: INSRS: INSRS:
WSP: World Arts.   WSP: WSP: WSP:
Tel :   Tel :   Tel :   Tel :
Liability :   Liability : Liability : Liability :
RMKS: RMKS: RMKS: RMKS:

Date/ Time			STAGE	DATE / PIC
	SLL192Z. X; SJR 8916 S. X		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:		

PRELIMINARY ADVICE Date/Time: _____ Sent By: _____

FINALIZATION Date/Time: _____ Confirm with: _____ Confirm by:
Repair Cost: S$ _____ (____ days) Reduction: ____ %   Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: _____ Confirm with _____   Email ☐ Call ☐
Final Liability: ___ % (Agreed / Assessed) BOLA S/N No. : _____   If NO or B 28, Ass. Lia :
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$ 1) Claim status: Normal/Reject/Private Settle
Disbursement: S$ (e.g. Tow/ Independent)   2) Report Format:
Legal Cost: S$ 3) Survey fee:
Total: S$ Global Sum S$:

FINAL PAYMENT Date/Time: _____ Confirm with: _____   Email ☐ Call ☐
Payee 1: S$ Name 1:
Payee 2: (Strike if N.A.) S$ Name 2:
Payee 3: (Strike if N.A.) S$ Name 3:

ASSIGNMENT

From: Date:	Veh No: **SLL 1927** Yr Regn: **10 FEB 2017**
Estimated Cost:	Type: (M.Car) / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No:	Make: HONDA VEZEL HYBRID c.c 1,496
at Workshop m/s	Colour SILVER A/C: (Insured) / Std / NI / NA
of	Sp.Reading 91,289 T/Radio: (Insured) / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/No: RU3 - 1223570
Claims No.	Gen. Cond: Good / (Fair) Poor / Burnt
Sum Insured: Excess:	Steering: (In order) / Jammed / Leaked / Burnt or
(Client's Record)	Brake: (In order) / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / (STD) A/Rim or
(Policy Condition)	Tyre Size: F: 215/60 R16
	R: 11

Remark: **The veh had commenced its repair at the time of inspection.**

	N/S	O/S
	x	x x

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or   GITI (F) DUNLOP (LR)

Bal. or Market Value: **85K**	**Front**		**Rear**
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 5 mm		R/Bal. 5 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 5 mm		L/Bal. 5 mm
Est. Repairs: **8** days Res.: Yes or No	D.O.A. **20/8/18**		D.O.I. **23/8/18**
Lum Sum: % 3 Val.: Yes or No	Survey held at WORLD AUTO		

CA / REV / REP. / 24 HRS

Des. of Damages : Frt / (Rear) / O/S / N/S / U/C / Rooftop or

Vehicle: IN / OUT

Date: Person Contacted:

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	AXA p.t.p

Date/Time, File Pass to? ☐ : **Preli. Report**	Days Of Repair:
1) ☐ : **Final Report**	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
2)	Add Fee: ☐ : Site Insp ($) __S + RS.__SI
	☐ : Interview ($) Photos
Report Format :	☐ : Tech. Invs ($) Others
Lump Sum / I.B.I: ($)	☐ : Weekend ($)
	TOTAL