

INS. CASE OWNER:

KC

CC 4 / ASM

180

17481 / T1 ha3

LKK:

71813

IDAC:

Surveyor:

TAMMICH

DOI:

ASSIGNMENT

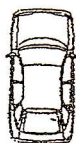
14/11/18

Date / Time:

25/09/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SLZ 9692P

Name of Insured:

Lim Chin Siang

Insured Tel No.:

HP:

96478475

Excess Sec II : SS

D.O.A.:

22/09/18

Is driver the owner?

(YES / NO)

Nature of Accident:

Claim No.:

58m00w/0

Policy No.:

GA357869/01

Make / Model:

Honda Fit

Place of Accident:

UPPER Bukit Timah RD

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

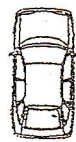
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SLZ MYRE



INSRS:

WSP:

Tel:

Liability:

RMKS:

c/c Lim



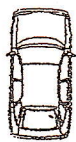
INSRS:

WSP:

Tel:

Liability:

RMKS:



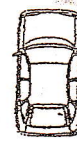
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

26/9

UL

SLZ MYRE. X; SUZ 9692P. X

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: DO FORM

12/11/18

- MUE ROUTED. OI REPAIR-EMPHASIS TP.
- SEND LETTER & EMAIL TO OI TO
NOTIFY TP CLAIM & NCD ISSUES.

- PENDING PK.

- AXA APPROVED BLS

- EMAIL CURRENCY CLARKE

- FINANCED.

14/12/18

- UPLOADED 14 IN GC.

- AXA APPROVED WANDER W/O TP LOD

- ORIGINAL TP LOD IN

19/02/19

06/06/19

- SEND 1ST OFFER TO TP.

- TP ACCEPTED OFFER.

- ALL DOCS IN ORDER.

- TO CLOSE.

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Repair Cost:

P/P

S\$

6,387.00 (5

days)

Reduction:

39

%

Confirm by:

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with:

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

24

If NO or B 28, Ass. Lia:

Repair Cost: (w/GRD)

S\$

6,780.59

COI REPAIR-EMPHASIS TP

Loss of Rental (LOR) (w/GRD)

S\$

799.00 (7

days)

x \$100.00

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\$

2.00

Medical:

S\$

-

Disbursement:

S\$

-

Legal Cost

S\$

-

(e.g. Tow/Independent)

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$250.00

Total:

S\$

7,531.59

Global Sum S\$:

-

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

7,531.59

Name 1:

OICUS & CHARGES KIA PTE LTD

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

-

Payee 3: (Strike if N.A.)

S\$

-

Name 3:

-