15/5/2010

INS. CASE OWNER: Winnie | CC 4/ASM AXA1801 9242, A442   LKK:
                                                               IDAC:

Surveyor: Adrian   DOI: 21|10|18   **ASSIGNMENT**   Date / Time: 21|10|18
                                                            Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : SLC 2904X   Claim No. : S8M0102F76857
Name of Insured   :   Policy No. :
Insured Tel No.   :   HP: Make / Model :
Excess Sec II :S$ D.O.A : 21|10|18   Place of Accident :
Is driver the owner? (YES / NO)   Nature of Accident :
If **NO**, Driver Name / Age :   OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO
Driver Tel No. :   (V/L: YES / NO)   Insured Liability :   %   **Final ? Yes / No**

GBG7732L →   →   →   →

| INSRS:
WSP:
Tel :
Liability :
RMKS: | new motor | INSRS:
WSP:
Tel :
Liability :
RMKS: | | INSRS:
WSP:
Tel :
Liability :
RMKS: | | INSRS:
WSP:
Tel :
Liability :
RMKS: |

Date/ Time			STAGE	DATE / PIC
	GBG7732L-X	SLC2904X-X	Non-Reporting ltr (1st):	
			Non-Reporting ltr (2nd):	
			Non-Reporting ltr (Final):	
			Notification ltr (if non-pickup):	
	# Smart claim.		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:	

PRELIMINARY ADVICE Date/Time:		Sent By:	Post-Repair Photos:	
			Others:	

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 + LO ☐ [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: **GBG 7733L** · Yr Regn: **2017 / Oct.**
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: **Toyota. Dyna** c.c **2982**
at Workshop m/s	Colour **Silver.** A/C: Insured / Std / NI / NA
of	Sp.Reading **18364** · T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/No: **KDY2318030732**
Claims No.	Gen. Cond: (Good) / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: (Inorder) / Jammed / Leaked / Burnt or
(Client's Record)	Brake: (Inorder) / Jammed / Leaked / Burnt or
Make of Veh:	Modi : (Nil) / S/Rim / STD A/Rim or

Tyre Size: F: **175/75 R15**

          R: **145 R13**

	N/S	O/S

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

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

Front		Rear	
R/Bal. **06** mm		R/Bal. **06** mm	
L/Bal. **06** mm		L/Bal. **06** mm	
D.O.A.		D.O.I. **22/10/18** ·	

Bal. or Market Value:	Survey held at **Chew Motor.**
IDAC Accident Rport: Consistent? : Yes or No	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
GIA / PR Seen: Consistent? : Yes or No	**Front o/s.**
Est. Repairs: days Res.: Yes or No	The U/C / Chassis frame / Body Structure affected due to collision.
Lum Sum: % 3 Val.: Yes or No	

CA / REV / REP. / 24 HRS   Vehicle: IN / OUT

Date: Person Contacted:

Date / Time	Action / Instruction
	Tp AXA.
	MV : 60 ·
	PV : 30.1K.
	Nett : 29.9K ·

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