15/5/2010

INS. CASE OWNER: peter | CC4/~~AXA~~ ASM 1900 0447, T1 ba3 | LKK: IDAC:

ASSIGNMENT

Surveyor: [illegible] DOI: 8/1/19 Date / Time : 8/1/19.

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : SLJ 1495D. Claim No. : 8Q mo 1956 / 92045

Name of Insured : Danny Policy No. : GW2184141

Insured Tel No. : HP: 91866759 Make / Model : Toyota

Excess Sec II :S$ D.O.A : 5/1/19. Place of Accident : Eunos MRT.

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**

SHD 1756. → → →

INSRS: WSP: premier. Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SHD 1756 → SLJ 1495D →
15/1/19	
[illegible]	
	~~Smart claim.~~
	pending midnight investigation from AXA
22/7/19	Confirm accident inform TP claim. letter send out
30/7/19	Seek mandate via SMART
04/08/2020.	settled & closed.

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	22/7/19
After call ltr to OI:	Vivian

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: P/P S$ 4,552.89 (4 days) Reduction: 35.22 % Email [ ] Call [ ]

FINAL SETTLEMENT Date/Time: 04/08/2020 Confirm with SHA FAWATI Email ✓ Cal [ ]

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: (w/ gst)	S$ 4,871.59	
Loss of Rental (LOR):	S$ 622.74 (6 days) x $ 103.79	OI rear-end TP.
Loss of Use (LOU):	S$ — ($ x days)	
Loss of Income (LOI):	S$ 300.00 ($ 50 x 6 days)	
LOR only [ ] LOU only [ ] LOR + LOU [ ] LOR + LOI [✓] [Tick only one]		
GIA/LTA Search	S$ 2.00	
Medical:	S$ —	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ — (e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$ —	3) Survey fee: $ 350.00
Total:	S$ 5,796.33 **Global Sum S$:** —	

FINAL PAYMENT Date/Time: Confirm with: Email [ ] Cal [ ]

Payee 1:	S$ 5,796.33	Name 1:	PREMIER AUTOMOTIVE SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—

Scanned with CamScanner