INS. CASE OWNER: Wang Ruifan | CC 4 / Asm 1900 2347 / Riha3 | LKK: IDAC: 97122

ASSIGNMENT

Surveyor: RAGUL DOI: 15/02/19 Date / Time : 7/2/19

Registered in Merimen: –

Pre-assign / CCU / FTE

Insured Vehicle No. :	SLA8607A	Claim No. :	S9M01D2G
Name of Insured :	Chua Hock Seng	Policy No. :	
Insured Tel No. :	HP:	Make / Model :	
Excess Sec II :S$	D.O.A : 7/2/19	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**

SLC 8986 U →

INSRS: WSP: Kah Motor. Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
12/2 VIC	SLC 8986 U. X ; SLA 8607 A. C6/AXA1700 2347/P1P6297 ; DOA: 31/1/19
12/02/19	- FILE REVIEWED. OI REAR-ENDED TP. SEND LETTER & EMAIL TO OI TO NOTIFY TP CLAIM & NCD ISSUES.
	- EMAIL LIABILITY CLEAR
01/04/19 @ 10:40AM	- SPOKE TO OI. CONFIRMED ACCIDENT DETAILS & REAR-ENDED TP. INFORMED TP CLAIM, AGREED TO SETTLE & AWARE NCD ISSUES.
	- UPLOAD IA IN OC.
	- FINALISED
	- TP LOD IN BY EMAIL
02/05/19	- UPLOAD REVISED MANDATE IA.
02/05/19	- AXA APPROVED MANDATE
22/05/19	- SEND ACCEPTANCE EMAIL TO TP.
23/05/19	- RECEIVED DV. ALL DOCS IN ORDER.
	- TO CLOSE.

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:	12/02/19 - VIC

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:	Sent By:	
FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: P/P	S$ 7,995.46 (5 days)	Reduction: 51 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 22/05/19	Confirm with DESMOND	Email ✓ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia : (OI REAR-ENDED TP)
Repair Cost: (W/GST)	S$ 8,555.14		
Loss of Rental (LOR):	S$ – (days)		
Loss of Use (LOU):	S$ 500.00 ($ 100 x 5 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: $350.00
Total:	S$ 9,055.14	**Global Sum S$:** –	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 9,055.14	Name 1: KAH MOTOR CO. SDN. BHD.	
Payee 2: (Strike if N.A.)	S$ –	Name 2: –	
Payee 3: (Strike if N.A.)	S$ –	Name 3: –	