s3

15/5/2010

INS. CASE OWNER: S-T | CC 4 /AXA1901 1377 / Kph | LKK: IDAC:

ASSIGNMENT

Surveyor: Kenneth DOI: 26/6/19 Date / Time : 26/6/19

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : SKK 977T. Claim No. : SAM0278081123619

Name of Insured : AW HUI LING ANDREA Policy No. :

Insured Tel No. : HP: Make / Model :

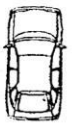
Excess Sec II :S$ D.O.A : 26/6/19. Place of Accident :

Is driver the owner? (YES / (NO)) Nature of Accident :

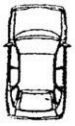
If **NO**, Driver Name / Age : OI GIA REPORT: (YES) / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : (V/L: (YES) / NO) Insured Liability : % **Final ? Yes / No**

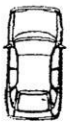
SUM 30777 → → → →



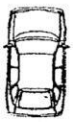
INSRS:
WSP:
Tel : Esteem.
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SUM 30777-X SKK977T-X
28/6/19	Called OI to inform TP claim
	Please note OZD request to be updated with repair cost by 05/07/19 if possible, thank you.
7/7/19	Wrong Case created wrongly by AXA under smart claim, instructed to hold while they create another case with correct policyholder
16/7/19	Liab Clear, ~~sent to w/s emailed w/s~~, pend LOD
18/7/19	Emailed to Kenneth for finalized estimate.
30/07/19	BASED ON OI'S CCTV FOOTAGE, HE IS TO BE BLAMED FOR CAUSING THE COLLISION - TO OFFER 50% IST, OR ELSE TO IMPROVE

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:	28/06/19 - Shirley - OK

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$ 1517.35 (3 days) Reduction: 50 % Email [ ] Call [ ]

FINAL SETTLEMENT Date/Time: 25/6/2019 Confirm with (Carmen) Email [ ] Call [ ]

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27 If NO or B 28, Ass. Lia :

Repair Cost: W/GST S$ 1623.56

Loss of Rental (LOR): S$ 297.76 (4 days) X $71.94

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$ 7.45

Medical: S$ –

Disbursement: S$ – (e.g. Tow/ Independent)

Legal Cost S$ –

1) Claim status: (Normal)/Reject/Private Settle

2) Report Format: TP

3) Survey fee: $350.00

Total: S$ 1918.77 **Global Sum S$:**

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

Payee 1:	S$ 1918.77	Name 1:	Esteem Performance Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	

(08/11/13)

ASS. REC. BY:

REF ASM (AXA)

ASSIGNMENT

From: Date: 26.6.2019

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SLM 3077Z

at Workshop m/s Esteem Performance

of 385 Sin Ming Drive

Insured:

Policy No.

Claims No.

Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: $ 8llc

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 03 days Res.: Yes or No

Lum Sum: 1.B.1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS mpp

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SLM 3077Z Yr Regn: 03 17

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or

Make: Toy Prius (A) c.c 1798

Colour M.P. White A/C: Insured / Std / NI / NA

Sp.Reading 119046 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JTDKB3FU303554064

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi : Nil / S/Rim / STD A/Rim or

Tyre Size: F: Rovelo 195/65R15

R: Pir

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

Front		Rear	
R/Bal.	7 mm	R/Bal.	9 mm
L/Bal.	7 mm	L/Bal.	8 mm
D.O.A.	26/6/19	D.O.I.	26/6/19

Survey held at ✓

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

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

Date / Time	Action / Instruction
	P/P
	$ 1517.35 base on calcution.
	(Red # 2131.90/ 58%).

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

☐ : Preli. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weekend ($)

Report Format :

Lump Sum / I.B.I: ($)

Survey Fee:	
Transportation:	
S + RS, SI	
Photos	
Others	
TOTAL	