LKK 125562
IDAC

HS / CASE OWNER: Peter Wang | CC 4/ASM19012121 / K pa3

ASSIGNMENT

Surveyor: Kenneth | DOI: 9/7/19 | Date / Time: 9/7/19

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No.	FBH 489 H	Claim No. :	S9M01T2J
Name of Insured	Wesley Meow Guang Xiong	Policy No. :	
Insured Tel No.	HP	Make / Model :	
Excess Sec II :S$	D.O.A 5/7/19	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**

SDN 5006E → → →

INSRS: WSP: Guan Hin Tel: Liability: RMKS:	INSRS: WSP: Tel: Liability: RMKS:	INSRS: WSP: Tel: Liability: RMKS:	INSRS: WSP: Tel: Liability: RMKS:

Date/ Time			
	SDN5006E : NA / WC16000951 / r3 ; D.O.A. 16/1/16	**STAGE**	**DATE / PIC**
	FBH 489H : X	Non-Reporting ltr (1st):	
		Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
15/7/19	AXA ✓ DS.	Call OI:	x/f (Syamas)
		After call ltr to OI:	10/7/19

		Documentation Check List	**Handler**	**Typist**
17/7/19	Rcvd mandate approval.	Notification ltr (if non-pickup):	✓	
3/2/2020	FTU ~~date~~ SCU to send DS ltr	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: P/P	S$ 932.93 (3 days)	Reduction: 52 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 3/3/2020	Confirm with: LC.	Email ✓ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No.: 15.	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 932.93		
Loss of Rental (LOR):	S$ –	(days)	
Loss of Use (LOU):	S$ 150.00	($50 x 3 days)	
Loss of Income (LOI):	S$ –	($ x days)	
LOR only ☐ LOU only ✓	LOR + LOU ☐	LOR + LOI ☐ [Tick only one]	
GIA/LTA Search	S$ 7.45		
Medical:	S$ –		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ –	(e.g. Tow/ Independent)	2) Report Format: Cap
Legal Cost:	S$ –		3) Survey fee: $250.00
Total:	**S$** 1090.38	**Global Sum S$:** 1090.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ✓ Call ☐
Payee 1:	S$ 1090.00	Name 1: Guan Hin Motor Worshop.	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	