15/5/2010

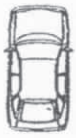
INS. CASE OWNER: Lionel Tan | CC4/FWD19021191/R1pa3 | LKK: IDAC:

ASSIGNMENT

Surveyor: RASUL DOI: 02.12.2019 Date / Time : 02.12.2019

Registered in Merimen: 02.12.2019

Pre-assign / CCU / FTE



Insured Vehicle No. : SGW 3422S Claim No. : 1201900037164

Name of Insured : MOHAMAD REZA BIN TAIB Policy No. : PNPV2018-00009564-01

Insured Tel No. : HP: +65-94373137 Make / Model : TOYOTA WISH 1.8 A

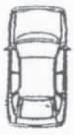
Excess Sec II :S$ D.O.A : 28/11/2019 16:55 Place of Accident : PIE EXIT ONTO UPP CHANGI RD EAST (SLIP ROAD)

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

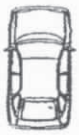
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

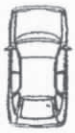
FBK 1798T → _____ → _____ → _____



INSRS:
WSP: Hua Chin (2000)
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	FBK 1798T / SGW 3422S } NBA/INC19021106/Y; DOA: 28.11.19; DOA: 28.1119 - CC4/AXA16013577/Uub3s2; DOA: 11.07.16

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:	

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:	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 + 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:
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:	

22/03/2002

ASS. REC. BY: | REF: CS/FWD1902111/R1.d3 | Special Instruction:

Surveyor: RASUT

ASSIGNMENT (Office)

From (Person): Vanessa Chan (minimum) of FWD Date/Time: 4.41pm@ 29/11/19

Estimated Cost: Bill to:

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

To Inspect Vehicle No: FBK 1798T Insured: SGW 3422S

at Workshop m/s Hua Chin (2000) Tel: 6896 6619

of 50 Bukit Batok st. 23 # 02-02

Policy No: Claim No: 120190003716 4

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 28/11/2019

CA / REV / REP. / REV 24 HRS (up)

H.O.D. Endorsement:

Date/Time: 10.06am@ 2/12/19 Person Contacted: Mr. Lim Vehicle IN / OUT

Date/Time	Action/Instruction Estimate ✓	
	FBK 1798T - NBA/INC 1902 1106/Y	DoA: 28/11/19
	SGW 3422S - COA/AXA 16013577/Uub352	DoA: 11/7/2016
3/12/19	@ 315pm Spoken to Irene agree on direct settlement	

ASS. REC. BY: Rama | REF: FWD | 9585

ASSIGNMENT

From: | Date: 2/12/19

Estimated Cost:

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

To Inspect Vehicle No: FBK 1798T

at Workshop m/s Hua Chin (2000)

of 50 Bukit Batok street 23# 02-02

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:

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS (up)

Vehicle: IN / OUT

Date: | Person Contacted:

Veh No: FBK 1798T Yr Regn: 2015 / APR

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

Make: HONDA MSX125 c.c 125

Colour RED A/C: Insured / Std / NI / NA

Sp.Reading 33909 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: MLHJC61A0F5200181

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: 120/70-12

R: 130/70-12

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

Front		Rear	
R/Bal.	3 mm	R/Bal.	3 mm
L/Bal.	mm	L/Bal.	mm
D.O.A.	28/11/19	D.O.I.	02/12/19

Survey held at HUA CHIN

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

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

Date / Time	Action / Instruction

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	