15/5/2010

INS. CASE OWNER: TEO Kitty 6568804602

CC4/ASM20001955/R1pa3

LKK:
IDAC: 158959

ASSIGNMENT

Surveyor: RASUL

DOI: 06/02/2020

Date / Time : 04/02/2020

Registered in Merimen: —

Pre-assign / CCU / FTE

X

Insured Vehicle No. : SMD 6084T

Name of Insured : CHEONG WEI YUEN

Insured Tel No. : 91834608 HP: +65-97517376

Excess Sec II :S$

D.O.A : 25/01/2020 11:40

Is driver the owner? (YES / NO)

Nature of Accident :

If **NO**, Driver Name / Age :

Driver Tel No. : (V/L: YES / NO)

Claim No. : S0M02EKV

Policy No. : VPA/P2170117

Make / Model : TOYOTA PRIUS PLUS-1.8 (A)

Place of Accident : PIE (AFTER PAYA LEBAR EXIT ON THE FLYOVER)

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % **Final ? Yes / No**

SJE 7377Y → → →

INSRS:
WSP: MTM Performance Auto Pte Ltd
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SJE 7377Y - X SMD 6084T - X	
4/2/20 5:42 PM	Proceed DS, quantum to be agreed	
04/09/2020	Pls refer to VIEWS for details.	

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: L/sum S$ 3,200.00 (7 days) Reduction: 43 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time 04/09/2020 Confirm with Edwin Email ☑ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27

If NO or B 28, Ass. Lia :

Repair Cost: S$ 2,900.00 (as per AXA mandate)

Loss of Rental (LOR): S$ (days)

Loss of Use (LOU): S$ 400.00 ($50 x 8 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$

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

Legal Cost S$

1) Claim status: Normal/[redacted]

2) Report Format: TP

3) Survey fee: $350.00

Total: S$ 3,300.00 **Global Sum S$:** 3,300.00 (as per AXA Mandate)

FINAL PAYMENT Date/Time: Confirm with: Email ☑ Call ☐

Payee 1:	S$ 3,300.00	Name 1:	MTM PERFORMANCE AUTO PTE. LTD.
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	