/5/2010

INS. CASE OWNER: KHONG Lynn 68804892

CC4/ASM20002959/Upa3

LKK:
IDAC: 161487

ASSIGNMENT

Surveyor: MARCUS DOI: 20/02/2020 Date / Time : 20/02/2020

Registered in Merimen: —

X

Pre-assign / CCU / FTE

Insured Vehicle No. : SJU 5802R
Name of Insured : WOON SEH BOON
Insured Tel No. : HP:
Excess Sec II :S$
Is driver the owner? (YES / NO)
If **NO**, Driver Name / Age :
Driver Tel No. :

Claim No. : S0M02GVF
Policy No. : GA393372
Make / Model : HONDA ODYSSEY 2.4
D.O.A : 20/02/2020 10:15
Place of Accident : EUNOS LINK TWRDS EUNOS CRESCENT
Nature of Accident :
(V/L: YES / NO)
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO
Insured Liability : % **Final ? Yes / No**

GBA 654J →

INSRS:
WSP: FASTECH
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SJU 5802R - X GBA 654J - X
21/2/2020	OINR. To send out first letter. File pass to Su Li. √ OINR

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	21/2/20
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: W/S S$ 7050.00 (7 days) Reduction: 69 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 20/2/20 Confirm with Jasmin Email ☐ Call ☐
Final Liability: % (Agreed / Assessed) BOLA S/N No. : 27 If NO or B 28, Ass. Lia :
Repair Cost: W/S7 S$ 7543.50
Loss of Rental (LOR): S$ 480.00 (6 days) XH 80.00
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$ 2.00
Medical: S$ —
Disbursement: S$ — (e.g. Tow/ Independent)
Legal Cost S$ —
Total: S$ 8025.50 **Global Sum S$:** 8000.00

COPY SENT

1) Claim status: Normal/Reject/Private Settle
2) Report Format:
3) Survey fee: $350.00

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

Payee 1:	S$ 8000.00	Name 1:	Fastech Auto Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	

(08/11/13) wef

ASS. REC. BY: Marcus

REF: AXA/

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No: GBA 654J

at Workshop m/s Rf.

of

Insured: SJV 5802R

Policy No.

Claims No.

Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

N/S	O/S

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

Bal. or Market Value: 17k.

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 7 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

395.0

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted: Tyres Hartplus.

Veh No: GBA 654J Yr Regn: 2007

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

Make: Toyota hiace c.c 2982

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

Sp.Reading 318574 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JTFHT02P700002100

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: 195 R15

R: westlake

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

Front			Rear		
R/Bal.	6	mm	R/Bal.	6	mm
L/Bal.	6	mm	L/Bal.	6	mm

(Front 6, Rear 6)

D.O.A. 20/2/20 D.O.I. 20/2/20

Survey held at —

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

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

Date / Time Action / Instruction

LYA 9474 Coe 6-2-2022

28/2/20 asln ~~tatto~~ Nett 7526

L/S $ ~~7500~~

US $7050.00 Creed $ 16366.85 / 698

Date/Time. File Pass to? : Preli. Report

1) : Final Report

Date/Time, File Return to?

2)

Report Format :

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

Days Of Repair:

Resurvey No. of Trip:

Add Fee: : Site Insp ($) __S + RS,__SI

: Interview ($) Photos

: Tech. Invs ($) Others

: Weekend ($)

Survey Fee:

Transportation:

TOTAL