

INS. CASE OWNER:

ASSIGNMENTSurveyor: **ADRIAN**DOI: **12/06/20220**Date / Time : **10/06/2020**Registered in Merimen: **---****Pre-assign / CCU / FTE**Insured Vehicle No. : **FBF 8475E**Claim No. : **S0M02P34**Name of Insured : **MOHAMMAD YAZID BIN ABDULLAH**Policy No. : **P2281363**Insured Tel No. : **HP: 96615931**Make / Model : **YAMAHA T135****Excess Sec II :S\$** **D.O.A : 24/02/2020 10:00**Place of Accident : **354 - ALEXIS - ALEXANDRA ROAD**

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

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

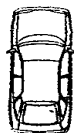
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. :

(V/L: YES / NO)

Insured Liability :

%

Final ? Yes / No**SMJ 631Y**INSRS:
WSP: **Premium Carz**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SMJ 631Y - X	FBF 8475E - X	STAGE	DATE / PIC
			Non-Reporting ltr (1st):	
			Non-Reporting ltr (2nd):	
			Non-Reporting ltr (Final):	
			Notification ltr (if non-pickup):	
10/06/2020	OINR.		Call OI:	
	MessageHi all, pls send NR letter to insured, and also to confirm with insured if he is aware of the offence - careless driving. Tks		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:	☐ ☐
PRELIMINARY ADVICE	Date/Time:	Sent By:	Post-Repair Photos:	☐ ☐
			Others:	☐ ☐
FINALIZATION	Date/Time:	Confirm with:	Confirm by: LWP	
Repair Cost: LS	S\$ 3,450.00 (5 days) Reduction: 44%		Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 19.04.22	Confirm with: AUN TENG	Email ☐ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL		If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 3,200.00 (AXA RECOMMEND)		OID CHARGED FOR CARELESS DRIVING	
Loss of Rental (LOR):	S\$ - (days)			
Loss of Use (LOU):	S\$ 250.00 (\$ 50 x 5 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: TP	
Legal Cost	S\$ -		3) Survey fee: \$320	
Total:	S\$ 3,457.45	Global Sum S\$:		
FINAL PAYMENT	Date/Time: 19.04.22	Confirm with: AUN TENG	Email ☐ Call ☐	
Payee 1:	S\$ 3,457.45	Name 1: PREMIUM CARZ SERVICES PTE LTD		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		