

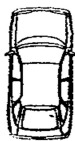
INS. CASE OWNER:

ASSIGNMENT

Surveyor:

ADRIANDOI: **12/10/2020**Date / Time : **13/10/2020 15/10/2020**Registered in Merimen: **13/10/2020**

Pre-assign / CCU / FTE

*** LKK SURVEY BEFORE
AXA GV ASSIGNMENT.
*** GIA RESULT SHOW
AIG / AXA.Insured Vehicle No. : **SJK 9681Z**Claim No. : **S0M02VDQ**Name of Insured : **ASSET LIMO**Policy No. : **P2382948**

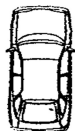
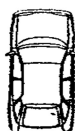
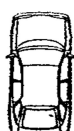
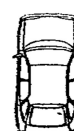
Insured Tel No. : _____ HP: _____

Make / Model : **HYUNDAI HD AVANTE 1.6 A**

Excess Sec II :S\$

D.O.A : **10/10/2020 10:00**Place of Accident : **NORTH BRIDGE ROAD TRAFFIC JUNCTION**Is driver the owner? (YES / **NO**) Nature of Accident : _____If **NO**, Driver Name / Age : **RAMAKRISHNA RAO CHAMASALAM**OI GIA REPORT: **YES** / NO ; TP GIA REPORT: **YES** / NO

Driver Tel No. : _____

(V/L: **YES** / NO)Insured Liability : % **Final ? Yes / No****SJH 682X**INSRS:
WSP: **NEW ZEN**
Tel : **WERKZ PTE**
Liability : **LTD**
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SJH 682X - CC3/ICS17016415/K1eb3s2 ; 23/08/2017 CS/TMI14000215/T1vm3k3 ; 03/01/2014	STAGE	DATE / PIC
	SJK 9681Z - CC4/AIG19000177/K1gb3q2 ; 01/01/2019	Non-Reporting ltr (1st):	
	NA/INC19017768/F ; 07/10/2019	Non-Reporting ltr (2nd):	
	NBA/AIG19000113/Y ; 01/01/2019	Non-Reporting ltr (Final):	
	NBA/AIG19016984/Y ; 25/09/2019	Notification ltr (if non-pickup):	
	NBA/AIG19017883/Y ; 07/10/2019	Call OI:	
	NBA/AIG20000598/Y ; 09/01/2020	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: LWP		
Repair Cost: L/S S\$ 6,200.00 (9 days) Reduction: 64 %		Email ☐ Call ☐	
FINAL SETTLEMENT Date/Time: 05.01.22 Confirm with CHRIS		Email ☐ Call ☐	
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :	
Repair Cost: w/GST S\$ 6,634.00		OI REAR ENDED TP	
Loss of Rental (LOR): S\$ - (_____ days)			
Loss of Use (LOU): S\$ 1,100.00 (\$ 100 x 11 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: \$350	
Total: S\$ 7,741.45 Global Sum S\$: 7,740.00			
FINAL PAYMENT Date/Time: 05.01.22 Confirm with: CHRIS		Email ☐ Call ☐	
Payee 1: S\$ 7,740.00 Name 1: NEW ZEN WERKZ PTE LTD			
Payee 2: (Strike if N.A.) S\$ _____ Name 2: _____			
Payee 3: (Strike if N.A.) S\$ _____ Name 3: _____			