

INS. CASE OWNER:

ASSIGNMENT

Surveyor:

KENNETH

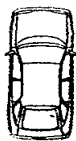
DOI:

29/04/2021

Date / Time :

27/04/2021

Registered in Merimen:

Pre-assign / CCU / FTEInsured Vehicle No. : **SHD 4362M**Claim No. : **S1M038WM**

Name of Insured : _____

Policy No. : **P2426680**

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **23/04/2021 11:40**Place of Accident : **Race Course Rd, Singapore**

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

If NO, Driver Name / Age :

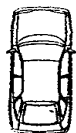
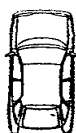
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. :

(V/L: YES / NO)

Insured Liability :

%

Final ? Yes / No**SMT 3622B**INSRS:
WSP: **COMPLETE**
Tel : **VMS**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SMT 3622B - X		
	SHD 4362M - CC3/AIG13023818/H1wa3q2 ; 13/12/2013	Non-Reporting ltr (1st):	
	CC3/FCI16005372/Kvh3n2 ; 20/03/2016	Non-Reporting ltr (2nd):	
	CC3/III16005372/Kzb3q2-1 ; 20/03/2016	Non-Reporting ltr (Final):	
	CC4/III16008492/Keb3q2 ; 03/05/2016	Notification ltr (if non-pickup):	
	CC4/III17021423/Dwb3q2 ; 07/11/2017	Call OI:	
	CC4/III20003026/Qga3q2 ; 20/02/2020	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:	☐
PRELIMINARY ADVICE	Date/Time: _____ Sent By: _____	Post-Repair Photos:	☐ ☐
		Others:	☐ ☐
FINALIZATION	Date/Time: _____ Confirm with: _____	Confirm by:	
Repair Cost: L/S	S\$ \$1,750.00 (3 days) Reduction: \$2,897.50 % 62	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 04/10/2021 Confirm with DARREN	Email ☒ Call ☐	
Final Liability:	% 80 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :	
Repair Cost: 1872.50	S\$ 1,498.00 W/GST		
Loss of Rental (LOR): 300	S\$ 240.00 (2 days) x \$150.00	AXA'S INSTRUCTION	
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\$ 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: \$350.00	
Total:	S\$ 1,745.45 Global Sum S\$: 1,740.00		
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☒ Call ☐	
Payee 1:	S\$ 1,740.00 Name 1: COMPLETE VMS PTE LTD		
Payee 2: (Strike if N.A.)	S\$ Name 2:		
Payee 3: (Strike if N.A.)	S\$ Name 3:		