15/5/2010

INS. CASE OWNER: CC4/ASM21008075/Apa3

LKK:

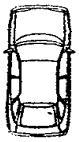
IDAC:

ASSIGNMENT

Surveyor: Adrian DOI: 30/07/2021 Date / Time : 09/07/2021

Registered in Merimen: –

Pre-assign / CCU / FTE



Insured Vehicle No. : YP 7946U Claim No. : S1M03EL3

Name of Insured : Legend Motors & Leasing Pte. Ltd. Policy No. : VFX/P1847906

Insured Tel No. : HP: Make / Model :

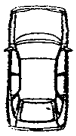
Excess Sec II :S$ D.O.A : 28/07/2021 Place of Accident :

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

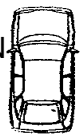
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

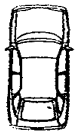
GBJ 6847H → → →



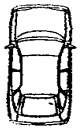
INSRS:
WSP: MG SOLUTION
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	GBJ 6847H : NA/CTI21008055/V ; DOA : 28/07/2021 YP 7946U :

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$ 8,800.00	(6 days) Reduction: 47 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 01/07/2022	Confirm with Ms Wong	Email ☑ Cal ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 8,667.00	(as per AXA mandate)	
Loss of Rental (LOR):	S$	(days)	
Loss of Use (LOU):	S$ 800.00	($100 x 8 days)	
Loss of Income (LOI):	S$	($ x days)	
LOR only ☐ LOU only ☑	LOR + LOU ☐	LOR + LO ☐ [**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: $350.00
Total:	**S$** 9,474.45	**Global Sum S$:** 9,400.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Cal ☐
Payee 1:	S$ 9,400.00	Name 1: MG Solution Pte Ltd	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	