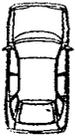|		
	CC4/ASM21013363/Ugs3	LKK:
INS. CASE OWNER:		IDAC:

ASSIGNMENT

Surveyor: **Marcus**   DOI: 31/12/2021   Date / Time : 31/12/2021

Registered in Merimen: ___

Pre-assign / CCU / FTE

Insured Vehicle No. : **SFD 1811C**   Claim No. : _____

Name of Insured : **NG HON MING FRANCIS**   Policy No. : _____

Insured Tel No. : ___   HP: ___   Make / Model : _____

Excess Sec II :S$ ___   D.O.A : **30/12/2021**   Place of Accident : **PIE TO TUAS**

Is driver the owner? (**YES** / NO)   Nature of Accident : ___
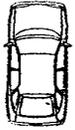
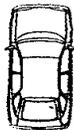If **NO**, Driver Name / Age : ___   OI GIA REPORT: **YES** / NO ; TP GIA REPORT: **YES** / NO

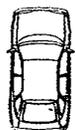Driver Tel No. : ___   (V/L: **YES** / NO)   Insured Liability : ___ %   **Final ? Yes / No**

SCW 30G ⟶   ⟶   ⟶

INSRS:	INSRS:	INSRS:	INSRS:
WSP: **FASTECH**	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time		STAGE	DATE / PIC
	SCW 30G : CS/CTI22000029/Uty3 ; DOA : 30/12/2021		
	SFD 1811C : CC4/ASM19014876/T1pb3q2 ; DOA : 13/08/2019	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:		☐

TPV: HONDA ACCORD - 2354cc

PRELIMINARY ADVICE Date/Time:		Sent By:	Post-Repair Photos: ☐ ☐
			Others: ☐ ☐

FINALIZATION Date/Time:	Confirm with:	Confirm by:
Repair Cost: **LS** S$ 9250.00 (11 days) Reduction: $27,638.60 % 75		Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 06/06/2022   Confirm with SHI YING   Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0%
Repair Cost:	S$ 9,309.00 W/GST (AXA INSTRUCTION)	
Loss of Rental (LOR):	S$ 1,100.00 (11 days) x $100	
Loss of Use (LOU):	S$ ($ x days)	C.C (OI LAST 3RD)
Loss of Income (LOI):	S$ ($ x days)	
LOR only ☑ LOU only ☐ LOR + LOU ☐ LOR + LO ☐ [**Tick only one**]		
GIA/LTA Search	S$ 2.00	
Medical:	S$	1) Claim status: **Nor**mal/Reject/Private Settle
Disbursement:	S$ (e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$	3) Survey fee: $350.00
Total:	S$ 10,411.50 **Global Sum S$:** 10,400.00	

FINAL PAYMENT Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 10,400.00 Name 1: FASTECH AUTO PTE LTD	
Payee 2: (Strike if N.A.)	S$ Name 2:	
Payee 3: (Strike if N.A.)	S$ Name 3:	