5/2010

INS. CASE OWNER: CC3 /LPC1600 7212 / K2a3G | LKK: IDAC:

ASSIGNMENT

Surveyor: ILEANETH DOI: 18.04.16 Date / Time: 18.04.16

Registered in Merimen: — —

Pre-assign / CCU / FTE

Insured Vehicle No. : SJF 9908Y Claim No. : 15/16/16/MP05/018648

Name of Insured : Muhammad Khairul Bin Muhd Kemal Policy No. : 315VP0500685J

Insured Tel No. : HP: Make / Model : KIA CARENS

Excess Sec II :S$ D.O.A : 16.04.16 Place of Accident : OPEN C/P - CHONG PANG MARKET

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

If NO, Driver Name / Age : NORASHIKIN BINTE MOHAMED ALI OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : 92257654 (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SHB 7912S → → →

INSRS: WSP: Trans-Cab Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SHB 7912S, CC3/A1G1201655J/KPa3G2 ; DOA: 03/09/13
21/04/16	SJF 9908Y, X
	file received, OI'd made 3 point turn. while doing so, TP reversed out from p/lot. Both vehicle collided.
	- FINALISED
	- ORIGINAL TP LOD IN
29/04/19	- TYPE REPORT FOR MANDATE APPROVAL
	- REPORT DONE
16/09/19	- BASIC MANDATE TO LPC
17/09/19	- LPC APPROVED MANDATE.
	- SEND 1ST OFFER TO TP.
24/09/19	- TP ACCEPTED OFFER.
	- ALL DOCS IN ORDER
	- TO CLOSE.

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: 20/04/16 Sent By: 93

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: LS S$ 1,800.00 (1.5 days) Reduction: 83 % Email Call

FINAL SETTLEMENT Date/Time: 23/09/19 Confirm with WAI YIN Email ✓ Call

Final Liability:	% 50 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: (W/OR) $ 1,126.00	S$ 963.00	
Loss of Rental (LOR $216.14)	S$ 108.07 (2 days) $ 108.07	
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 $6.00	S$ 6.00	
Medical: —	S$ —	1) Claim status: Normal/Reject/Private Settle
Disbursement: —	S$ — (e.g. Tow/ Independent)	2) Report Format:
Legal Cost —	S$ —	3) Survey fee: $ 150.00
Total: $2,148.14	S$ 1,077.07 Global Sum S$: 1,050.00	

FINAL PAYMENT Date/Time: Confirm with: Email Call

Payee 1:	S$ 1,050.00	Name 1:	TRANS-CAD AUTO SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—