15/5/2010

INS. CASE OWNER: Gerald | CC3 /LPC160 13956, Khg3 b3 /12 | LKK: IDAC:

ASSIGNMENT

Surveyor: Kenneth DOI: 26/7/16 Date / Time : 26/7/16

Pre-assign / CCU / FTE

Insured Vehicle No. :	SJG 8301 Z	Claim No. :	16/10/16/VP05/019052
Name of Insured :	Junaidi Bin Abdullah	Policy No. :	Z16VP0580945
Insured Tel No. :	HP: 98221415	Make / Model :	Toyota Vios G7 Auto
Excess Sec II :S$	D.O.A : 22/7/16	Place of Accident :	Along CTE towards SLE
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**

PB1

SHA 1500S → SJM 7854U → SJG 8301Z → SHC 5346J → SJJ 5156E

INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: OI Tel : Liability : RMKS:	INSRS: WSP: TP Tel : Trans-cab. Liability : RMKS:

Date/ Time		STAGE	DATE / PIC
26/7/16 VC	SHC 5346J = KC3/M/G/1508019971 Khg382 ...	Non-Reporting ltr (1st):	
		Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
22/08/16	- FILE REVIEWED. OI INVOLVED IN A 5 VEH. C.C.	Call OI:	VIC
	4 WAS THE 3RD CAR & WAS PUSHED FROM	After call ltr to OI:	
	BEHIND.		

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:		

- PENDING FOR FINALIZATION.
- FINALIZED.
- ORIGINAL - TP LOD IN.

19/11/18 - TYPE REPORT FOR MANDATE APPROVAL
- REPORT DONE.

31/01/19 - SEEK MANDATE APPROVAL TO LPC.

22/04/19 - LPC APPROVED MANDATE. @ G/S $26K (A-N)

12/06/19 - SEND 1ST OFFER TO TP.

Since Mandate is approved, BOLA IS APPLIED, TO EXPEDITE THE SETTLEMENT WITH T/P SOONEST POSSIBLE TO CLOSE THE FILE

- TP ACCEPTED OFFER. ALL DOCS IN ORDER.

PRELIMINARY ADVICE Date/Time: 27/07/16 Sent By: GS

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: P/P S$ 25,248.04 (12 days) Reduction: 73 % Email ☐ Call ☐

FINAL SETTLEMENT	Date/Time: 22/07/19 Confirm with WAI YIN	Email ✓ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0%
Repair Cost: CW/GST	S$ 27,015.40	(5 VEH. C.C., OI 3RD CAR)
Loss of Rental (LOR):	S$ 1,669.20 (13 days) x $128.40	
Loss of Use (LOU):	S$ — ($ x days)	
Loss of Income (LOI):	S$ — ($ x days)	
LOR only ✓ LOU only ☐	LOR + LOU ☐ LOR + LOI ☐ **[Tick only one]**	
GIA/LTA Search	S$ 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: $450.00
Total:	S$ 28,684.60 **Global Sum S$:** 27,500.00	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 27,500.00	Name 1: TRANS-CAB AUTO SERVICES PTE LTD	
Payee 2: (Strike if N.A.)	S$ —	Name 2: —	
Payee 3: (Strike if N.A.)	S$ —	Name 3: —	