15/5/2010

INS. CASE OWNER: CHOOK LEE WAI IVY

CC 3 / LCR170 18831 , Khia3 9v

LKK:
IDAC:

ASSIGNMENT

Surveyor: KSL　DOI: 29/09/2017　Date / Time : 29/09/17

Registered in Merimen: 2/10/17

Pre-assign / CCU / FTE SLF 5881S

Insured Vehicle No. :		Claim No. :	650564884056
Name of Insured :	LCRF PTE LTD	Policy No. :	999995170
Insured Tel No. :	HP:	Make / Model :	TOYOTA SIENTA
Excess Sec II :S$	D.O.A : 29/09/2017	Place of Accident :	PIE (TOWARDS CHANGI AIRPORT)
Is driver the owner? (YES / NO) [NO circled]	Nature of Accident :		

If NO, Driver Name / Age : SEO CHEE HWA (XIAO ZHIHUA)　OI GIA REPORT: YES / NO [YES circled] ; TP GIA REPORT: YES / NO [YES circled]

Driver Tel No. : 3158 4255　(V/L: YES / NO) [YES circled]　Insured Liability : %　**Final ? Yes / No**

SHB 7671 L →　→　→

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

Date/ Time	
2/10	SHB7671L - cs/AVA/1701/4036/kfl/2017 DOA: 29/9/17
	SLF5881S - X
12/10/17	Email letter to O2
8/3/18	Email to AIG to seek advise
8/3/18	Email from AIG, maintain 50%. receive PIR. No action taken on any parties.
9/5/19	— ETM : TP rejected 50%
21/5/19	Email to AIG to seek advise
	- PENDING TP CLAIM UPDATE
06-11-19	TO ASK T/P TO PRODUCE PSR'S STATEMENT OR THE POSITION OF EARLIER ACCIDENT FOR OUR REVIEW
05/03/2020	- TYPE REPORT FOR MANDATE
	- REPORT DONE

STAGE	**DATE / PIC**
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	12/10/17 email
After call ltr to OI:	9/10/17

Documentation Check List:	**Handler**	**Typist**
Notification ltr (if non-pickup):	☐	☐
After call ltr to OI: EMAIL	☑	☐
Authorisation To Act:	☑	☐
Release Voucher:	☐	☐
Final Repair Bill:	☑	☐
Car Rental Invoice:	☑	☐
Towing Invoice	☐	☐
LTA / GIA :	☑	☐
Medical Bill:	☐	☐
PIR: NO ACTION	☑	☐
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: LG　S$ 11,350.00 (15 days) Reduction: 54 %　Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 22.02.21　Confirm with WAI YIN　Email ☐ Call ☐

Final Liability:	% 50 (Agreed / Assessed) BOLA S/N No. : N/L	If NO or B 28, Ass. Lia :
(w/GST) Repair Cost: $12,144.50	S$ 6,072.25	
Loss of Rental (LOR): $1,655.50	S$ 827.75 (22 days) x $75.25	
Loss of Use (LOU): —	S$ — ($ x days)	
Loss of Income (LOI): —	S$ — ($ x days)	
LOR only ☐ LOU only ☐	LOR + LOU ☐ LOR + LOI ☐ **[Tick only one]**	
GIA/LTA Search: $5.35	S$ 5.35	
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: $320
Total: $13,805.35	S$ 6,905.35	**Global Sum S$:**

FINAL PAYMENT Date/Time: 22.02.21　Confirm with: WAI YIN　Email ☐ Call ☐

Payee 1:	S$ 6,905.35	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: —