15/5/2010

INS. CASE OWNER: Kian Chuan | CC3 / AIG1702 2829 / Kiha3 | LKK: IDAC:

ASSIGNMENT

Surveyor: KALVIN DOI: 30/11/17 Date / Time: 30/11/17

Registered in Merimen: 01/12/17

Pre-assign / CCU / FTE

Insured Vehicle No. : SKE 8288C | Claim No. : 5160974766SG

Name of Insured : WANG XIAOQI | Policy No. : 2100276252-06000

Insured Tel No. : HP: | Make / Model : MERCEDES-BENZ C180K

Excess Sec II :S$ D.O.A : 29/11/17 | Place of Accident : CTE NEAR ORCHARD EXIT

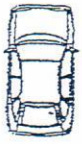
Is driver the owner? (YES / NO) | Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. : 9230 3688 (V/L: YES / NO) | OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % Final ? Yes / No

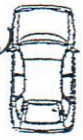
SHD 7060P → SKE 8288C (OI) → SHD 3346S (TP) →



INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP: COGE (Loyang)
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SHD 3346S - CC3/AIG1700 4155/H1hb3g2 DOA: 25/02/17 - CC3/LCR17016260/K1qb3 DOA: 18/08/17 - CC3/TMI1101009Q/H1qn DOA: 11/05/11 - NS/INC1200 8372/H1qn DOA: 21/04/12 - NS/INC1400 3852/H1qm3C3 DOA: 25/02/14 - NS/INC1700 7845/H1hb2 DOA: 18/04/17 - NS/INC1701 1801/H1hbk2 DOA: 15/06/17
	SKE 8288C - X
07/12/17 (VIC)	- FINALISED.
14/12/17 @3:44PM	- SPOKE TO OI. SHE CONFIRMED ACCIDENT DETAILS U WAS INVOLVED IN A 3 VEH. C.O. U WAS THE 2ND CAR. INFORMED TP CLAIM U NCF, AGREED TO OFFER U AWARD NCD ISSUED. SEND LETTER TO OI.
	- ORIGINAL TP LOD IN.
26/12/17	- SEND 1ST OFFER TO TP.
27/12/17	- 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:	14/12/17 - VIC
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: T/P S$ 1,060.48 (2 days) Reduction: 56 % Email [ ] Call [ ]

FINAL SETTLEMENT Date/Time: 27/12/17 Confirm with COCHIA Email [✓] Call [ ]

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0% (3 VEH. C.O.; OI 2ND)
Repair Cost: CW(GST)	S$ 1,134.71	
Loss of Rental (LOR):	S$ 250.00 (2 days) X $125.00	
Loss of Use (LOU):	S$ 100.00 ($ 50 x 2 days)	
Loss of Income (LOI):	S$ — ($ x days)	
LOR only [ ] LOU only [ ]	LOR + LOU [ ] LOR + LOI [✓] [Tick only one]	
GIA/LTA Search	S$ 5.35	
Medical:	S$ —	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ — (e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ —	3) Survey fee: $320.00
Total:	S$ 1,490.06 **Global Sum S$:** 1,490.00	

FINAL PAYMENT Date/Time: Confirm with: Email [ ] Call [ ]

Payee 1:	S$ 1,490.00	Name 1:	COMFORTDELGRO ENGINEERING PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—