15/5/2010

INS. CASE OWNER:

CC 4/AIG1800 0174, EW63

LKK:

IDAC:

ASSIGNMENT

Surveyor: FSL

DOI: 3/1/18

Date / Time: 3/1/18

Registered in Merimen: 3/1/18

Pre-assign / CCU / FTE

Insured Vehicle No.: SKT 3021J

Name of Insured: EUROKARS LEASING PTE

Insured Tel No.:

HP:

Excess Sec II :S$

D.O.A.: 29/12/17

Claim No.: 0114705794M

Policy No.: 99994499(1008731275-00007

Make / Model: MAZDA

Place of Accident: JLN BOON LAY TWDS JLN BAHAR

Is driver the owner? (YES / NO)

Nature of Accident:

If NO, Driver Name / Age: ANG LI LING

Driver Tel No.: 90277484 (V/L: YES / NO)

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability: %

Final ? Yes / No

SFC 6638J →

INSRS:	INSRS:	INSRS:	INSRS:
WSP: MBM.	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time	
4/1/18 VIC	SFC 6638J - NPA (UP 6011788)/4 DOA 29/12/17
	SKT3021J - X
3/1/18 @ 4.30 hrs	Miss called OID, Ang, 90277484 but no response
	- TO FOLLOW UP CALL OI.
08/01/18	- LETTER SENT OUT
12/01/18	- FINAL LIABILITY CLEAR.
	- FINALIZED.
12/1/18 @ 1138 am	spoke to OID, Miss Ang, 90277484, agreed to settled on TP claims aware of NCD issue -
	- ORIGINAL TP LOD IN.
04/05/18	- SEND 1ST OFFER TO TP
	- 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: 12/1/18 Ssith Hawa	
After call ltr to OI: 08/01/18 - VIC	

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:

LOCALIZATION Date/Time: Confirm with: Confirm by: Email ☐ Call ☐

Repair Cost: PP S$ 2,667.72 (4 days) Reduction: 49 %

FINAL SETTLEMENT Date/Time: 04/05/18 Confirm with YIN SHEW Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No.: 27	If NO or B 28, Ass. Lia : COID REAR-ENDED TP)
Repair Cost: (W/GST)	S$ 2,854.46	
Loss of Rental (LOR) (W/GST)	S$ 428.00 (4 days) x $100.00	
Loss of Use (LOU):	S$ – ($ x days)	
Loss of Income (LOI):	S$ – ($ x days)	
LOR only ✓ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S$ 7.45	
Medical:	S$ –	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ – (e.g. Tow/ Independent)	2) Report Format:
Other Cost	S$ –	3) Survey fee: $320.00
Total:	S$ 3,289.91 Global Sum S$: –	

FINAL PAYMENT Date/Time: Confirm with: Email ☐ Call ☐

Payee 1:	S$ 3,289.91	Name 1:	MBM WHEELPOWER PTE LTD
Payee 2: (Strike if N.A.)	S$ –	Name 2:	–
Payee 3: (Strike if N.A.)	S$ –	Name 3:	–