15/5/2010

INS. CASE OWNER: CC 3 /AIG1800 1720 , A WB

LKK:

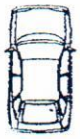
IDAC:

ASSIGNMENT

Surveyor: adrian DOI: 29/01/18 Date / Time : 29/1/18

Registered in Merimen: 29/1/18

Pre-assign / CCU / FTE



Insured Vehicle No. : SDW 7918G

Name of Insured : GAN FONG YIN

Insured Tel No. : HP: 97459178

Excess Sec II :S$ D.O.A : 30/1/18

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

Claim No. : 658467473359

Policy No. : 170005950

Make / Model : BMO1

Place of Accident : JUNC OF CHOA CHU KANG RD & WOODLANDS RD

If **NO.** Driver Name / Age :

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

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

Insured Liability : % **Final ? Yes / No**

SKF 6189 → → →

INSRS:
WSP: premium
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
29/01/18	SKF 6189 — X SDW 7918G — X
VC	
31/01/18	- OWNER CAUTION CLEAR. $60/$100 LOU/R.
01/02/18 @ 0950 hrs	spoke to OI, Gan Fong Yin @ 97459178 agreed to settled on TP claims, aware of NCD issue.
20/02/18	- SEND LETTER TO OI. - FINALISED. - ORIGINAL TP LOD IN.
06/04/18	- CONFIRMED AMOUNT SAME AS LOD. - TPD CLAIMING MEDICAL BILL INVOICE - ALL 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: 01/02/18 9.54	
After call ltr to OI:	20/02/18 - 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:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: T/P S$ 4,059.92 (4 days) Reduction: 59 % Email [ ] Call [ ]

FINAL SETTLEMENT Date/Time: 06/04/18 Confirm with MASTORA Email [ ] Call [ ]

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27 If NO or B 28, Ass. Lia : (OI REAR-ENDED TP)

Repair Cost: (W/GST) S$ 4,344.11

Loss of Rental (LOR): S$ — (days)

Loss of Use (LOU): S$ 300.00 ($60 x 5 days)

Loss of Income (LOI): S$ — ($ x days)

LOR only [ ] LOU only [✓] LOR + LOU [ ] LOR + LOI [ ] [**Tick only one**]

GIA/LTA Search S$ —

Medical: S$ 200.00 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$ 4,844.11 **Global Sum S$:** —

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

Payee 1:	S$ 4,344.11	Name 1:	PREMIUM AUTOMOBILES PTE LTD	
Payee 2: (Strike if N.A.)	S$ 300.00	Name 2:	CAROLINE TENG SU FONG	(OWNER)
Payee 3: (Strike if N.A.)	S$ 200.00	Name 3:	LEOW HENG PAI	(DRIVER)