15/5/2010

INS. CASE OWNER: CC 4/AIG1800 vvb / klw3

LKK:

IDAC:

ASSIGNMENT

Surveyor: KENNETH DOI: 20/02/18 Date / Time : 5/2/18

Registered in Merimen: 5/2/18

Pre-assign / CCU / FTE

Insured Vehicle No. : SKA 3294M Claim No. : 94719786766 SG

Name of Insured : TAN BOON WAN, CATHERINE. Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 04/01/18 Place of Accident :

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**

PC 3788K → → →

INSRS: ESTEEM. WSP: Tel : Liability : RMKS:

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Date/ Time	
2/2/18 NZ	PC3788K-4 SKA3294M-4 - NO OI GIA. SENT OUT 1ST LETTER.
21/02/18	- OI GIA REPORT IN.
06/03/18	call OI confirm accident details OI reverse and collided with TP. OI want to know the final repair bill. OI mention ex only scratches on his vehicle. OI email NIL will be attached IPT/IV sent to OI.
	- FINALISED.
12/04/18	- EMAIL LIABILITY CLOSE - TP LOD IN BY EMAIL.
13/07/18	- 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:	7 BEVAN. CLH 12/3
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: F/P S$ 1,007.67 (1 days) Reduction: 36 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 13/07/18 Confirm with CARLSON Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 23	If NO or B 28, Ass. Lia :
Repair Cost: (W/GST)	S$ 1,078.21	OI HIT TO STATIONARY TP. CLH 12/3
Loss of Rental (LOR):	S$ — (days)	
Loss of Use (LOU):	S$ 100.00 ($100 x 1 days)	
Loss of Income (LOI):	S$ — ($ 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:
Legal Cost	S$ —	3) Survey fee: $320.00
Total:	S$ 1,185.66 **Global Sum S$:** 1,180.00	

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

Payee 1:	S$ 1,180.00	Name 1:	ESTEEM PERFORMANCE PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—