15/5/2010

INS. CASE OWNER: | CC 3/AIG1800 24-26 / M2/63 | LKK: IDAC:

ASSIGNMENT

Surveyor: MCF DOI: 6/2/18 Date / Time : 6/2/18
Registered in Merimen: 6/2/18

Pre-assign / CCU / FTE

Insured Vehicle No. :	SCJ 382J	Claim No. :	5228940649GG
Name of Insured :	Chua Hong Lian	Policy No. :	7004279744-08
Insured Tel No. :	HP: 91176161	Make / Model :	Jaguar
Excess Sec II :S$	D.O.A : 05/02/18	Place of Accident :	Eu Tong Seng St

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**

SHD 8527D → → →

INSRS: UOE	INSRS:	INSRS:	INSRS:
WSP: Wj.	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time	
12/2/18	SHD8527D - NS/MC1600156339/H3V6... DOR: 17/8/16
77N	SCJ382J - CHUA HONG LIAN/1001333333/T... DOR: 17/7/16
	- FINALISED
	- ORIGINAL TP LOD IN
08/08/19 @ 2:14PM	- CALL OI. NO RESPONSE. FILE REVIEWED. SIDE SWIPED. SEND LETTER & EMAIL TO OI TO NOTIFY TP CLAIM & NCD ISSUES.
	- TO GET TP VIDEO FOOTAGE / OI CLAIM STATUS
	- TP NO EVIDENCE. PROPOSED 50/50.
28/05/19 @ 4:34PM	- SPOKE TO PAUL (WORKSHOP), OI UNDERTAKE CLAIM. DID NOT DO TP CLAIM.
	- SEND SET 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:	
After call ltr to OI:	08/08/19 - 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: P/P S$ 940.00 (2 days) Reduction: 70 %   Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 28/05/19 Confirm with ALLSON   Email ✓ Call ☐

Final Liability:	% 50 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia : SIDE SWIPED
(Claimed) Repair Cost: $1,005.80	S$ 502.90	
Loss of Rental (LOR) $409.50	S$ 204.75 (3.5 days) X $117.00	
Loss of Use (LOU) $175	S$ 87.50 ($ 50 x 3.5 days)	
Loss of Income (LOI): —	S$ — ($ x days)	
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ✓ [Tick only one]		
GIA/LTA Search $7.49	S$ 7.49	
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: $1,597.79	S$ 802.64 **Global Sum S$:** 800.00	

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

Payee 1:	S$ 800.00	Name 1:	COMFORTDELGRO ENGINEERING PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—