15/5/2010

INS. CASE OWNER: AIDA | CC3/III1800 4776 / R1 4663 | LKK: IDAC:

ASSIGNMENT

Surveyor: RASUL DOI: 02/04/18 Date / Time: 13/3/18

Registered in Merimen: 13/3/18

Pre-assign / CCU / FTE

Insured Vehicle No. :	SHA 5981K	Claim No. :	MCT18030391
Name of Insured :	CTPL	Policy No. :	MLOMO015
Insured Tel No. :	HP:	Make / Model :	HYUNDAI
Excess Sec II :S$	D.O.A : 11/3/18	Place of Accident :	SLIP RD FROM BRADDELL RD TWDS LOR 6 TOA PAYOH
Is driver the owner? (YES / NO)	Nature of Accident :		
If NO, Driver Name / Age : MUNASIB BIN RASO		OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO	
Driver Tel No. :	(V/L: YES / NO)	Insured Liability : %	Final ? Yes / No

SKV4480M → → →

INSRS: WSP: performance Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
14/3/18	SKV4480M -4 SHA5981K -4
V/C	
19/03/18	- FILE REVIEWED. OIV REAR-ENDED TP.
	- SEEK LIABILITY MANDATE.
	- III AGREED P/G.
22/03/18	- EMAIL LIABILITY CLEAR
	- FINALISED
	- ORIGINAL TP LOD IN
15/01/19	- TYPE REPORT FOR MANDATE APPROVAL
	- REPORT DONE
29/01/19	- SEEK MANDATE APPROVAL TO III BY MERIMEN.
	- TP NO AFTER REPAIR PHOTOS
13/03/19	- III APPROVED MANDATE.
	- CONFIRMED AMOUNT SAME AS LOD
	- 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:	V/C
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$ 2,136.40 (3 days) Reduction: 59 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 13/03/19	Confirm with CAROLINE	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :
Repair Cost: (W/GST)	S$ 2,285.95		COLD REAR-ENDED TP
Loss of Rental (LOR):	S$ — (days)		
Loss of Use (LOU):	S$ 300.00 ($ 100 x 3 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$ —		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ —	(e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ —		3) Survey fee: $350.00
Total:	S$ 2,585.95	Global Sum S$: —	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 2,585.95	Name 1: PERFORMANCE MOTORS LIMITED	
Payee 2: (Strike if N.A.)	S$ —	Name 2: —	
Payee 3: (Strike if N.A.)	S$ —	Name 3: —	