15/5/2010

INS. CASE OWNER: SHERMIN | CC 4/III1800 4847, 4467 | LKK: IDAC:

ASSIGNMENT

Surveyor: Marcus DOI: 14/03/18 Date / Time : 14/7/18

Registered in Merimen: 14/7/18

Pre-assign / CCU / FTE

Insured Vehicle No. : SHD 6762D Claim No. : HCT 18030335

Name of Insured : CTPL Policy No. : MMW0015

Insured Tel No. : HP: Make / Model : MERLEDES

Excess Sec II :S$ D.O.A : 11/7/18 Place of Accident : LUCKY PLAZA TAXI STAND OFF ORCHARD RD

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

If NO, Driver Name / Age : VER HUCK HAT OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SLT 3448A → → →

INSRS:	INSRS:	INSRS:	INSRS:
WSP: Pegasus	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time	
14/7/18	SLT 3448A - T SHD 6762D - E
v/c	
15/03/18	- FILE REVIEWED. OI OPEN DOOR.
	- III AGREED B/G.
	- FINAL LIABILITY CLEAR FINALISED.
	- ORIGINAL TP LOD IN.
11/04/18	- TYPE REPORT FOR MANDATE APPROVAL
	- REPORT DONE
25/04/18	- SEEK MANDATE TO III BY WORKING
08/05/18	- III APPROVED MANDATE.
	RECEIVED 13 APR 2018
14/05/18	- SEND 1ST OFFER TO TP
	- RECEIVED ORIG. SIGNED DV.
	- TP ACCEPTED OFFER.
23/07/18	- 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: GRAB STATEMENT	✓	

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: F/P S$ 3,178.88 (4 days) Reduction: 17 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 21/06/18 Confirm with SHARON Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 26	If NO or B 28, Ass. Lia :
Repair Cost: (w/GST)	S$ 3,401.40	COID OPEN DOOR)
Loss of Rental (LOR):	S$ — (days)	
Loss of Use (LOU):	S$ 319.80 ($ 79.95 x 4 days) x $79.95 (GRAB RATE)	
Loss of Income (LOI):	S$ 795.68 ($198.92 x 4 days) (GRAB WEEKLY STATEMENT)	
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☑ [Tick only one]		
GIA/LTA Search	S$ 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: $350.00
Total:	S$ 4,524.33 **Global Sum S$:** 4,520.00	

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

Payee 1:	S$ 4,520.00	Name 1:	PEGASUS ENGINEERING & TRADING PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—