

INS. CASE OWNER:

CC6 /AIG1800

LKK:

IDAC:

Surveyor:

ADRIAN

DOI:

ASSIGNMENT

23/03/18

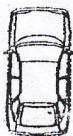
Date / Time :

14/2/18

Registered in Merimen:

14/2/18

Pre-assign / CCU / FTE



Insured Vehicle No. :

SGT 1984R

Name of Insured :

FOOMA FOON YUEN

Insured Tel No. :

HP: 96244443

Excess Sec II :S\$

D.O.A : 16/2/18

Is driver the owner?

(YES / NO)

Nature of Accident :

Claim No. :

827046441239

Policy No. :

71000610128 10000

Make / Model :

TOYOTA

Place of Accident :

PUE TAMS WOK - 70A payoh

If NO. Driver Name / Age :

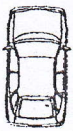
Driver Tel No. :

(V/L: YES / NO)

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

Insured Liability : % Final ? Yes / No

CB 7067R



INSRS:

WSP:

Tel :

Liability :

RMKS:

FONG
MOTOR

INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time		STAGE	DATE / PIC
21/2/18	CB 7067R - F	Non-Reporting ltr (1st):	
	SGT 1984R - F	Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	7.29032018
		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:	☒ ☐
		Rental Invoice:	☐ ☐
		Towing Invoice	☐ ☐
		LTA/ GIA :	☒ ☐
		Medical Bill:	☐ ☐
		PIR:	☐ ☐
		Mandate/Reject Instruction:	☐ ☐
		LOD	☒ ☐
		Payment Breakdown Form:	☐ ☐
		Post-Repair Photos:	☐ ☐
		Others:	☐ ☐

23/07/18	- Spoke to OIO (Mr Foong). Confirmed accident details and mentioned that OIO rear-ended TP. Informed abt TP claim, aware of v-club issues and agreed to settle. Send letter to OI.
30/07/18	- Email, 11461572424.
14/08/18	- MINAUGED
	- ORIG. TP LOD IN.
	- SEND 1st OFFER. BUILT TO TP.
	- TP REQUESTED OFFER. PROPOSED LOU 4700.
	- TP ACCEPTED OFFER & LOU 4700/PAID.
	- ALL DOCS IN ORDER.
	- TO CLOSE.

PRELIMINARY ADVICE	Date/Time:	Sent By:
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PRELIMINARY ADVICE		Date/Time:	Sent By:
FINALIZATION		Date/Time:	Confirm with:
Repair Cost:	L6	S\$ 2,900.00	(4 days) Reduction: 50 %
FINAL SETTLEMENT		Date/Time:	Confirm with:
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. :	27
Repair Cost:	S\$ 2,900.00		
Loss of Rental (LOR):	S\$ -	(days)	
Loss of Use (LOU):	S\$ 600.00	(\$ 150 x 4 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\$ -		
Disbursement:	S\$ -	(e.g. Tow/ Independent)	
Legal Cost	S\$ -		
Total:	S\$ 3,507.45	Global Sum S\$:	-
FINAL PAYMENT		Date/Time:	Confirm with:
Payee 1:	S\$ 3,507.45	Name 1:	FONG MOTORS
Payee 2: (Strike if N.A.)	S\$ -	Name 2:	-
Payee 3: (Strike if N.A.)	S\$ -	Name 3:	-