INS. CASE OWNER: NATALIE   CC3/III1800 5383, R,443   LKK: IDAC:

ASSIGNMENT

Surveyor: RASUL   DOI: 09/04/18   Date / Time: 27/7/8

Registered in Merimen: 7/7/18

Pre-assign / CCU / FTE

Insured Vehicle No. : SMD 3164A	Claim No. : MOT18030672
Name of Insured : GPL	Policy No. : MI DM00L5
Insured Tel No. : HP:	Make / Model : HYUNDAI
Excess Sec II :S$ D.O.A : 7/7/18	Place of Accident : 410 Upp Fong Rd Twds Upp
Is driver the owner? (YES /(NO)) Nature of Accident :	Thomson Rd By ST65
If NO, Driver Name / Age : JASWANT 51MIN	OI GIA REPORT:(YES)/ NO ; TP GIA REPORT:(YES)/ NO
Driver Tel No. : (V/L:(YES)/ NO)	Insured Liability : % **Final ? Yes / No**

SET 9380H

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

Date/ Time			STAGE	DATE / PIC
27/7/8	SET 9380A →		Non-Reporting ltr (1st):	
	SMD3164A - 65/07/2018 484 TG DON 27/6/18		Non-Reporting ltr (2nd):	
√2			Non-Reporting ltr (Final):	
	RECEIVED 1 4 AUG 2018		Notification ltr (if non-pickup):	VIC
			Call OI:	
28/05/18	FIVE RETURNED. OLD REAR-ENDED TP.		After call ltr to OI:	
	SEEK LIABILITY MANDATE TO III		**Documentation Check List: Handler Typist**	
	III AGREED D/L.		Notification ltr (if non-pickup)	
26/05/18	OWN LIABILITY CLEAR		After call ltr to OI:	
	FINALISED		Authorisation To Act:	✓
	ORIGINAL TP LOD IN.		Release Voucher:	✓
31/07/18	TYPE REPORT FOR MANDATE APPROVAL		Final Repair Bill:	✓
	REPORT DONE.		Car Rental Invoice:	
06/08/18	SEEK MANDATE APPROVAL TO III BY MERIMEN		Towing Invoice:	
07/08/18	III APPROVED MANDATE.		LTA / GIA :	
			Medical Bill:	
08/08/18	CONFIRMED AMOUNT SAME AS LOD.		PIR:	
	ALL DOCS IN ORDER.		Mandate/Reject Instruction:	✓
	TO CLOSE.		LOD	✓
			Payment Breakdown Form:	

PRELIMINARY ADVICE Date/Time:	Sent By:	Post-Repair Photos:	
		Others:	

FINALIZATION	Date/Time:	Confirm with:	Confirm by:	
Repair Cost: FIP	S$ 3,490.80 (3 days) Reduction: 44 %		Email ☐ Call ☐	

FINAL SETTLEMENT	Date/Time: 08/08/18	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$ 3,735.16		OLD REAR-ENDED TP)	
Loss of Rental (LOR):	S$ — (days)			
Loss of Use (LOU):	S$ 500.00 $100 x 3 days)			
Loss of Income (LOI):	S$ — ($ x days)			
LOR only ☐ LOU only ☐ ✓LOR + LOU ☐ LOR + LOI ☐ [Tick only one]				
GIA/LTA Search	S$ —		1) Claim status: Normal/Reject/Private Settle	
Medical:	S$ —		2) Report Format:	
Disbursement:	S$ — (e.g. Tow/ Independent)		3) Survey fee: $580.00	
Legal Cost	S$ —			
Total:	S$ 4,035.16	Global Sum S$:		

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐	
Payee 1:	S$ 4,035.16	Name 1: PERFORMANCE MOTORS LIMITED		
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—	
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—	

COPY SENT 16/8
ENTERED 17 AUG 2018