15/5/2010

		LKK:
INS. CASE OWNER:	NATALIE	CC4 /III1800 5383, R1443	IDAC:

ASSIGNMENT

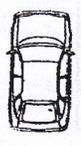Surveyor: RASUL   DOI: 09/04/18   Date / Time: 27/7/18

Registered in Merimen: 27/7/18

Pre-assign / CCU / FTE
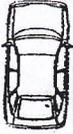
Insured Vehicle No. : SHD 3164A   Claim No. : MGTI8030672

Name of Insured : GPL   Policy No. : MIDM0015

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

Excess Sec II :S$ D.O.A : 27/7/18   Place of Accident : 410 UPP FANG RD TWDS UPP

Is driver the owner? (YES / (NO))   Nature of Accident :   THOMSON RD BY ST 65

If NO, Driver Name / Age : JASWANT SINGH   OI GIA REPORT: (YES) / NO ; TP GIA REPORT: (YES)/ NO

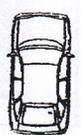Driver Tel No. :   (V/L: (YES) / NO)   Insured Liability :   %   **Final ?** Yes / No
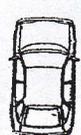
SET 9380H

INSRS: INSRS: INSRS: INSRS:
WSP: Performance   WSP: WSP: WSP:
Tel :   Tel :   Tel :   Tel :
Liability :   Liability :   Liability :   Liability :
RMKS: RMKS: RMKS: RMKS:

Date/ Time		STAGE	DATE / PIC
27/7/18 27/7/18 27/7	SET 9380H - ✓ SUBMITTED - CS/CE/2018/8484 to DOC 27/6/18	Non-Reporting ltr (1st):	
		Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
23/03/18	- FILE REVIEWED. OIC REAR-ENDED TP.	Call OI:	VIC
	- SEEK LIABILITY MANDATE TO III	After call ltr to OI:	
	- III AGREED D/L.	**Documentation Check List:**	**Handler Typist**
26/03/18	- EMAIL LIABILITY CLEAR	Notification ltr (if non-pickup):	
	- FINALISED	After call ltr to OI:	
	- ORIGINAL TP LOD IN.	Authorisation To Act:	✓
31/07/18	- TYPE REPORT FOR MANDATE APPROVAL	Release Voucher:	✓
	- REPORT DONE.	Final Repair Bill:	✓
		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: P/P	S$ 3,490.80 (3 days)	Reduction:	11 %		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	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: 300.00	
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: —	