15/5/2010

INS. CASE OWNER: Maricel | CC 3/LCR1800 7103 / Klwa3 | LKK: | IDAC:

ASSIGNMENT

Surveyor: AMC DOI: 16.04.18 Date / Time: 16.04.18

Registered in Merimen: 17.04.18

Pre-assign / CCU / FTE

Insured Vehicle No. : SLL 1023Y
Claim No. : 493159 54435G
Name of Insured : LCRF PL
Policy No. : 099999 4818
Insured Tel No. : HP:
Make / Model : Honda Vezel
Excess Sec II :S$ D.O.A : 14.04-18
Place of Accident : Parkway Parade
Is driver the owner? (YES / NO) Nature of Accident :
If NO, Driver Name / Age : Lim Ewah Hock (LIN Youbfan)
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO
Driver Tel No. : (V/L: YES / NO)
Insured Liability : % **Final ? Yes / No**

SHB 3682G →

INSRS:
WSP: CDG Bloyang.
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
19/4 Vivian	SHB3682G X:
	SLL1023Y. CC6/LCR1701 8447 /Klwb3; DOA. 14/04/17
19/4/18	Email letter to OI.

RECEIVED 0 5 JUN 2018

STAGE	**DATE / PIC**
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	19/4/18 email.
After call ltr to OI:	Vivian

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: S$ (days) Reduction: % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 5/6/18 Confirm with Cecilia Email ☐ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 26.	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 2140.00	COPY SENT 5/6/18
Loss of Rental (LOR):	S$ 417.48 (3.5 days) X 119.28	
Loss of Use (LOU):	S$ 175.00 ($ 50 x 3.5 days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S$ 7.49 ENTERED 0 8 JUN 2018	1) Claim status: Normal/Reject/Private Settle
Medical:	S$	2) Report Format:
Disbursement:	S$ (e.g. Tow/ Independent)	3) Survey fee:
Legal Cost	S$	
Total:	S$ 2739.97 **Global Sum S$:** 2700.00	

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

Payee 1:	S$ 2700.00.	Name 1: Comfortdelgro Engineering Pte Ltd.
Payee 2: (Strike if N.A.)	S$	Name 2:
Payee 3: (Strike if N.A.)	S$	Name 3: