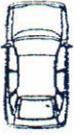| INS. CASE OWNER: | CC 3 /EQI1800 7567, K1hb3 | LKK: |
| | | IDAC: |

ASSIGNMENT

Surveyor: Kalvin   DOI: m/4/18   Date / Time: 24/18

Registered in Merimen: ～

Pre-assign / CCU / FTE

Insured Vehicle No. : GR 7702J   Claim No. :

Name of Insured : JL MARINE & ENGINEERING P/L   Policy No. : DMCPCTQ 1t-004095

Insured Tel No. : ___   HP: ___   Make / Model : TOYOTA

Excess Sec II :S$ ___   D.O.A : 21/4/18   Place of Accident : COON LEE RD

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

If NO. Driver Name / Age : MUTHURAMAN BALASUBRAMANIAN   OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

SHD 3460U →

INSRS:	INSRS:	INSRS:	INSRS:
WSP: EDGE	WSP:	WSP:	WSP:
Tel : W.	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time				STAGE	DATE / PIC
10/4/18	SHD3460U-4 GR7702J-x			Non-Reporting ltr (1st):	
VC	- FINALISED			Non-Reporting ltr (2nd):	
3/5/2018 Polikin	Spoke to Ms Cherry (HR of JL Marine). Confirmed about the accident			Non-Reporting ltr (Final):	
	statement. Informed her about the TP claim and HCD issue.			Notification ltr (if non-pickup):	
	She aware about HCD issue. Send letter to OI.			Call OI: 3/5/2018	VIC-OK GE/05
				After call ltr to OI: 3/5/2018	

Documentation Check List:	Handler	Typist
Notification ltr (if non-pickup)		
After call ltr to OI	✓	
Authorisation To Act	✓	
Release Voucher: NO DV		
Final Repair Bill	✓	
Car Rental Invoice	✓	
Towing Invoice		
LTA / GIA :	✓	
Medical Bill		
PIR		
Mandate/Reject Instruction		
LOD	✓	
Payment Breakdown Form		
Post-Repair Photos		
Others		

- ORIGINAL TP LOD IN

05/06/18
- SEND 1ST OFFER TO TP
- TP ACCEPTED OFFER. NO DV REQUIRED.
- ALL DOCS IN ORDER.
- TO CLOSE.

PRELIMINARY ADVICE Date/Time: 24/4/18   Sent By: Dave

FINALIZATION Date/Time: ___   Confirm with: ___   Confirm by: ___

Repair Cost: TP   S$ 4,547.90 (3 days) Reduction: 32 %   Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 05/06/18   Confirm with: SIM   Email ✓ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27   If NO or B 28, Ass. Lia :

Repair Cost: CW/GST   S$ 4,866.25   COLD REAR-ENDED TP)

Loss of Rental (LOR): S$ 409.50 (3.5 days) X $ 117.00

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

Medical: S$ —   1) Claim status: Normal/Reject/Private Settle

Disbursement: S$ — (e.g. Tow/ Independent)   2) Report Format: ___

Legal Cost: S$ —   3) Survey fee: $ 400.00

Total: S$ 5,458.24   Global Sum S$: 5,450.00

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

Payee 1: S$ 5,450.00   Name 1: COMFORTDELGRO ENGINEERING PTE LTD

Payee 2: (Strike if N.A.) S$ —   Name 2: —

Payee 3: (Strike if N.A.) S$ —   Name 3: —