15/5/2010

I.S. CASE OWNER: JG | CC 4/EQ1 1800 7666 / Khai | LKK: | IDAC:

ASSIGNMENT

Surveyor: KSC | DOI: 25/4/18 | Date / Time: 26/04/18

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : GBH 1458P

Name of Insured : AVENTURINE ENG. P/L

Insured Tel No. : _____ HP: _____

Excess Sec II :S$ _____ D.O.A : 24/4/18

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

If NO, Driver Name / Age : Subramoniam Karthikesan

Driver Tel No. : 91424480 (V/L: YES / NO)

Claim No. : DMG1700084 9-JG

Policy No. : DMCP1218-001451

Make / Model : T-DYNA.

Place of Accident : Junction of JLN Wangi & Mulberry Ave

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

Insured Liability : % **Final ? Yes / No**

SJZ 5455T →

INSRS:
WSP:
Tel : UM Tan.
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
26/4	SJZ 5455T. X ; GBH 1458P. X
	- TP GOT VIDEO, TO REQUEST.
	- BOOTH TURNING. TO CHECK OI CLAIM STATUS.
4/5/2018 4.30pm	- KIV video Footage, spoke to Mr Desmond (Aventurine Engineering) asking about their third party claim progress. Noting done by their workshop as they haven send their vehicle to workshop. Informed him sent vehicle to workshop ASAP as their claim will not be success if they fail to comply protocol.
7/5/2018	s0/s0 letter
11/05/18	- EMAIL CAPABILITY UNCLEAR
	- TP NO GUIDENCE.
	- TP LOD IN BY EMAIL
11/02/19	- EMAIL TO EQ FOR INSTRUCTIONS
	- EQ APPROVED TO REQUEST
04/06/19	- EMAIL TO TP TO REQUEST CLAIM
	- TO CLOSE.

Reject Case
By (staff) : VK
Approved by :
Date : 04/06/19

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	VIC-OIC 11/5
After call ltr to OI:	8/5/2018

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		
Police Report:	✓	
Medical Bill:		
PIR:		
Mandate/Reject Instruction:	✓	
LOD	✓	
Payment Breakdown Form:		
Post-Repair Photos:	✓	
Others:		

PRELIMINARY ADVICE Date/Time: 26/4 Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: LIS S$ 21050.00 (4 days) Reduction: 28 % Email ☐ Call ☐

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

Final Liability:	% (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia : BOOTH TURNING OLD WITHIN LANE, TP OVERTAKING
Repair Cost:	S$ —	
Loss of Rental (LOR):	S$ — (days)	
Loss of Use (LOU):	S$ — ($ x 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$ —	
Disbursement:	S$ — (e.g. Tow/ Independent)	1) Claim status: Normal/Reject/Private Settle
Legal Cost	S$ —	2) Report Format:
Total:	**S$** — **Global Sum S$:**	3) Survey fee: $400.00

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

Payee 1:	S$ —	Name 1:	—
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—