

BIS, CASE OWNER:

CC 6 / AIG1800 8635, Aha3

LKK:

IDAC:

ASSIGNMENT

DATE:

07/5/18

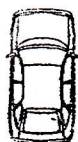
Date / Time:

07/5/18

Registered in:

11/5/18

Pre-assign / CCU / FTE



Insured Vehicle No. : SCN 63J
 Name of Insured : Ng Ai Yen Theresa
 Insured Tel No. : 94883939 HP: 94883939
 Excess Sec II : \$S D.O.A : 4/5/18
 Is driver the owner? (YES / NO) Nature of Accident :

Claim No. : 160018443
 Policy No. : 7. Vanya
 Make / Model : Function of Enos Link Highway
 Place of Accident : Ave 3

If NO, Driver Name / Age :

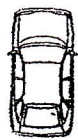
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. :

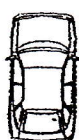
(V/L: YES / NO)

Insured Liability : % Final ? Yes / No

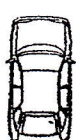
SKS 3875S



INSRS: Kang Kan
 WSP:
 Tel :
 Liability :
 RMKS:



INSRS:
 WSP:
 Tel :
 Liability :
 RMKS:



INSRS:
 WSP:
 Tel :
 Liability :
 RMKS:



INSRS:
 WSP:
 Tel :
 Liability :
 RMKS:

Date / Time		STAGE	DATE / PIC
15/5	SKS 3875S, club (11/1/2007/93/ Aha3m) : 11/1/18	Non-Reporting ltr (1st):	
15/5	SCN 63J X	Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
16/05/18	File completed. OI Report - ENOS TP.	Notification ltr (if non-pickup):	
	Call OI: 1/15/2018	After call ltr to OI:	1/15/2018
10am pohkin 17/5/2018	- Spoke to OI, confirmed accident statement, informed OI about TP claim and HCD issue. OI dispute on damages, have to let her know the settlement amount before close case. Agreed to settlement aware the HCD issue. End letter to OI.	Documentation Check List: Handler Typist	
	Finalized.	Notification ltr (if non-pickup)	
14/09/18 26/09/18	TP LOD IN BY EMAIL.	After call ltr to OI:	
	Send 1st offer to TP.	Authorisation To Act:	
	TP accepted offer.	Release Voucher:	
	All docs in order.	Final Repair Bill:	
	To close.	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:
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FINALIZATION	Date/Time:	Confirm with:	Confirm by:
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Repair Cost: Lg	\$S 6,000.00 (9 days)	Reduction: 43 %	Email ☐ Call ☐
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FINAL SETTLEMENT	Date/Time: 25/09/18	Confirm with: SHARON	Email ☒ Call ☐
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Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
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Repair Cost: (w/600)	\$S 6,420.00		COI KKK - ENOS TP
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Loss of Rental (LOR):	\$S - (days)		
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Loss of Use (LOU):	\$S 1200.00 (\$100 x 12 days)	TURNOV CTR	
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Loss of Income (LOI):	\$S - (\$ x days)		
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LOR only ☐ LOU only ☒	LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
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GIA/LTA Search	\$S 2.00		
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Medical:	\$S -		1) Claim status: Normal/Reject/Private Settle
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Disbursement:	\$S -	(e.g. Tow/ Independent)	2) Report Format:
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Legal Cost	\$S -		3) Survey fee: 4500.00
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Total:	\$S 7,622.00	Global Sum \$S: -	
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FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
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Payee 1:	\$S 7,622.00	Name 1: KANG CAT KOPAKOTO PIS LTD	
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Payee 2: (Strike if N.A.)	\$S -	Name 2: -	
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Payee 3: (Strike if N.A.)	\$S -	Name 3: -	
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