15/5/2010

INS. CASE OWNER: SHERINI | CC 4/III1801 0283 / G 6639

LKK:
IDAC:

ASSIGNMENT

Surveyor: XGQ   DOI: 07/06/18   Date / Time: 6/6/18

Registered in Merimen: 6/6/18

Pre-assign / CCU / FTE

Insured Vehicle No. : SMB 6712J
Name of Insured : LTM
Insured Tel No. : HP:
Excess Sec II :S$ D.O.A : 4/6/18
Is driver the owner? (YES / NO) [NO circled]
If NO, Driver Name / Age : LAM CHENG LEONG (LIN ZHENHUANG)
Driver Tel No. : (V/L: YES / NO) [YES circled]

Claim No. : MCT18060137
Policy No. : MCLOM0015
Make / Model : MERCEDES
Place of Accident : MARINA BAY CRUISE CENTRE
Nature of Accident : DROP OFF POINT
OI GIA REPORT: YES / NO [YES circled] ; TP GIA REPORT: YES / NO [YES circled]
Insured Liability : % **Final ? Yes / No**

SLX 5479B → → →

INSRS:	INSRS:	INSRS:	INSRS:
WSP: Ah Lim	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time	
7/6/18 vivian	SLX 5479B – x SMB 6712J – x
7/6/18	Seek liability via merimen
7/6/18	liability clear via merimen
	– FINALIZED
	– TP LOD IN BY EMAIL
29/01/19	– TYPE REPORT FOR MANDATE APPROVAL
	– REPORT DONE
01/02/19	– SEEK MANDATE APPROVAL TO III BY MERIMEN.
04/02/19	– III APPROVED MANDATE.
08/02/19	– SEND 1ST OFFER TO TP.
11/02/19	– TP REVISED CLAIM.
12/03/19	– RESEEK MANDATE
13/03/19	– REVISED MANDATE APPROVED.

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

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: WEEKLY EARNING	✓	

PRELIMINARY ADVICE Date/Time: Sent By:
– TP ACCEPTED OFFER. ALL DOCS IN ORDER

FINALIZATION Date/Time: Confirm with: Confirm by:
Repair Cost: P/P S$ 1,852.50 (5 days) Reduction: 31 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 13/03/19 Confirm with HUI HONG Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) [Agreed circled] BOLA S/N No. : ✓	If NO or B 28, Ass. Lia : COID CHANGED LANE)
Repair Cost: (W/GST)	S$ 1,982.18	
Loss of Rental (LOR):	S$ — (days)	
Loss of Use (LOU):	S$ 900.00 ($ 150 x 6 days) – WEEKLY INCOME (GRAB)	
Loss of Income (LOI):	S$ — ($ x days)	
LOR only ☐ LOU only ☐	LOR + LOU ☐ LOR + LOI ☐ [Tick only one]	
GIA/LTA Search	S$ 7.45	
Medical:	S$ —	
Disbursement:	S$ — (e.g. Tow/ Independent)	1) Claim status: Normal/Reject/Private Settle [Normal circled]
Legal Cost	S$ —	2) Report Format:
		3) Survey fee: $ 350.00
Total:	S$ 2,889.63 **Global Sum S$:** 2,800.00	

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

Payee 1:	S$ 2,800.00	Name 1:	AH LIM MOTOR COMPANY
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	