15/5/2010

INS. CASE OWNER: CC3 / CTI 180 10403 / 19ha39

LKK:

IDAC:

ASSIGNMENT

Surveyor: Ank DOI: 6/6/18 Date / Time : 8/6/18

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : GW9679D

Claim No. : SNM18002832602

Name of Insured : Gmee Hong Co (P) L

Policy No. : DMCVSB0148321713

Insured Tel No. : 6747 2408 HP:

Make / Model : T. Liteace

Excess Sec II :S$ D.O.A : 05-06-18

Place of Accident : Still Rd

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

If NO, Driver Name / Age : Teo Kim Hua

Driver Tel No. : 90908870 (V/L: YES / NO)

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

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

SHC 2160Y → → →

INSRS: WSP: Cove Tel : Liability : Paying RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
19/6	SHC 2160Y - CS/F/1116014548/Ug h3n7 : DOA: 3/8/16
VC	GW 9679D - X
	- FINALISED. RECEIVED 10 AUG 2018
	- ORIGINAL TP LOD IN
26/06/18 @ 5:12PM	- SPOKE TO OI PIC. SHE CONFIRMED ACCIDENT DETAILS 4 OIO REAR-ENDED TP. INFORMED TP CLAIM, AGREED TO SETTLE 4 AWARE ACD ISSUES. SEND LETTER 4 EMAIL TO OI.
07/08/18	- NO FEEDBACK FROM OI TILL DATE.
	- BELOW $3K MANDATE.
	- SEND 1ST OFFER TO TP.
10/08/18	- RECEIVED ORIG. DV. TP ACCEPTED OFFER.
	- ALL DOCS IN ORDER.
	- TO CLOSE.

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	26/06/18 - VK
After call ltr to OI:	26/06/18 - VK

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: 8/6 Sent By: Ykn

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: P/P S$ 1,979.63 (3 days) Reduction: 56 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 07/08/18 Confirm with WILLIAM Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia : COIO REAR-ENDED TP)
Repair Cost: (W/GST)	S$ 2,118.20	
Loss of Rental (LOR):	S$ 438.90 (3.5 days) X $125.40	
Loss of Use (LOU):	S$ 175.00 ($ 50 x 3.5 days)	COPY SENT 10/8/18
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$ — 2739.59	3) Survey fee: $400.00
Total:	**S$** 2,739.59 **Global Sum S$:** 2,700.00	

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

Payee 1:	S$ 2,700.00	Name 1: COMPOSITEBUILD ENGINEERING PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2: —
Payee 3: (Strike if N.A.)	S$ —	Name 3: —