

15/5/2010

INS. CASE OWNER: LALITHA | CC 6/III1801 0561, Atbbs | LKK: IDAC:

Surveyor: Adrian | DOI: ASSIGNMENT 8/6/18 | Date / Time: 8/6/18

Pre-assign / CCU / FTE Registered in Merimen: 17/6/18

Insured Vehicle No.: SEQ 9005H Claim No.: MMA180124
Name of Insured: COMFORTDELERO RENT-A-CAR P/L Policy No.: M46080R
Insured Tel No.: _____ HP: _____ Make / Model: MITSUBISHI
Excess Sec II :\$\$ _____ D.O.A.: 8/6/18 Place of Accident: ECP / CHANGI
Is driver the owner? (YES / NO) Nature of Accident: _____
If NO, Driver Name / Age: TODA YUSUKE
Driver Tel No.: _____ (V/L: YES / NO) OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

INSRS: WSP: Tel: Liability: RMKS: 01
INSRS: WSP: Tel: Liability: RMKS: TP
INSRS: WSP: Tel: Liability: RMKS: _____

Date/ Time	STAGE	DATE / PIC
<u>17/6/18</u>	<u>VIC</u>	
<u>27/06/18</u>	<u>FILE REVIEWED. OIG INVOLVED IN A 3 VEH. C.C. & WAS THE LAST CAR.</u>	
<u>29/06/18</u>	<u>SEEK LIABILITY MANDATE TO III</u>	
<u>26/09/18</u>	<u>MINIALIZED. TP LOD IN TYPE REPORT FOR MANDATE APPROVAL</u>	
<u>12/10/18</u>	<u>REPORT DONE</u>	
<u>14/10/18</u>	<u>SEEK MANDATE APPROVAL TO III.</u>	
<u>16/10/18</u>	<u>III APPROVED MANDATE</u>	
<u>27/12/18</u>	<u>SEND 1ST OFFER TO TP. RECEIVED 28 SEP 2018. REVISOR ORIG. DOCS. TP ACCEPTED OFFER. ALL IN ORDER.</u>	

PRELIMINARY ADVICE Date/Time: _____ Sent By: _____

FINALIZATION Date/Time: _____ Confirm with: _____

Repair Cost: L19 S\$ 11,200.00 (12 days) Reduction: _____ % Confirm with: _____

FINAL SETTLEMENT Date/Time: 27/12/18 Confirm with: MR LEANG Email: _____ Call: _____

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No.: 28

Repair Cost: S\$ 11,200.00

Loss of Rental (LOR): S\$ 1,000.00 (10 days) x \$100

Loss of Use (LOU): S\$ _____ (\$ x days)

Loss of Income (LOI): S\$ _____ (\$ x days)

LOR only LOU only LOR + LOU LOR + LO [Tick only one]

GIA/LTA Search S\$ 7.45

Medical: S\$ _____

Disbursement: TOWING S\$ 60.00 (e.g. Tow/Independent)

Legal Cost S\$ _____

Total: S\$ 12,267.45 Global Sum S\$: 12,260.00

1) Claim status: Normal / Reject / Private Settle
2) Report Format: _____
3) Survey fee: \$600.00

FINAL PAYMENT Date/Time: _____ Confirm with: _____

Payee 1: S\$ 12,260.00 Name 1: LEANG AUTOMOTIVE Email: _____ Call: _____

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

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