15/5/2010

INS. CASE OWNER: CC 4 /AIG1801 1644 / KH73

LKK:

IDAC:

Surveyor: RSC

ASSIGNMENT

DOI: 14/6/18

Date / Time : 26/6/18

Registered in Merimen: 26/6/18

Pre-assign / CCU / FTE

Insured Vehicle No. : SLS 7337R

Name of Insured : FOO SHOW BOON SCHUBERT.

Insured Tel No. : HP:

Excess Sec II :S$ D.O.A : 25/6/18

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

If **NO**, Driver Name / Age :

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

Claim No. : 08749807888G

Policy No. : 1700087MP.

Make / Model : MERCEDES.

Place of Accident : KTE SMP RD TO WOODLAND RD

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

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

SJT9218P → → →

INSRS: WSP: Tel : Liability : RMKS: complete VMS.

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
2/7/18 VIC	SJT9218P - Y SLS7337R - Y
19/07/18 @ 9:47 AM	- CALL OI 2X. NO RESPONSE. FILE REVIEWED. OI REPAIR-ENDED TP. SEND LETTER TO OI TO NOTIFY TP CLAIM.
	- EMAIL LIABILITY CLEAR
	- FINALISED.
	- ORIGINAL TP LOD IN.
10/09/18	- SEND 1ST OFFER TO TP
	- 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:	
After call ltr to OI:	19/07/18 - VIC

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: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: L/S S$ 5,050.00 (6 days) Reduction: 41 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 10/09/18 Confirm with LILY Email ✓ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27 If NO or B 28, Ass. Lia : COI REPAIR-ENDED TP

Repair Cost: (W/GST) S$ 5,403.50

Loss of Rental (LOR): S$ 700.00 (7 days) X $100.00

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: S$ — (e.g. Tow/ Independent)

Legal Cost S$ —

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee: $320.00

Total: S$ 6,110.95 **Global Sum S$:** 6,110.00

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

Payee 1:	S$ 6,110.00	Name 1:	COMPLETE VMS PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—