15/5/2010

INS. CASE OWNER: ~~Shirley~~ Catherine | CC b /CTI1801 Vbnb; Afbhsz | LKK: IDAC:

ASSIGNMENT

Surveyor: Adrian DOI: 9/7/18 Date / Time : 9/7/18 Polkin

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : SLQ 4574P Claim No. : SWM1800337516Y

Name of Insured : BULLY ADRIAN Policy No. : OMPCCW3055X1700

Insured Tel No. : HP: 96385426 Make / Model : Toyota

Excess Sec II :S$ D.O.A : 8/7/18 Place of Accident : JUNC OF BET PAYA LEBAR ST 25 & EAST AVE 3

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

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**

SFZ 1801R → → →

INSRS: WSP: Tel : Liability : RMKS: WAIT.

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
16/7/18 pankin.	SFZ 1801R - Y SLQ 4574P - X
	BOLA 27, 100%
17/7/2018 4.45 pm	spoke to OI, confirmed accident statement (BOLA 27) informed TP claim and NCD issue. OI agree to settle and aware the NCD issue. Send letter to OI.
	email liability clear to TP workshop
	pending Estimate from Adrian
	letter ✓
19/7/2018	the pass type mandate report
	need after repair photo

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:	17/7/2018 clh 19/7

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: 14/11/2018 Sent By: Call

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: S$ 4,500.00 (5 days) Reduction: 67.47 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 21/12/18 Confirm with Suki Email ✓ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27 If NO or B 28. Ass. Lia :

Repair Cost: S$ 4,500.00

Loss of Rental (LOR): S$ 300.00 (3 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$

Front to rear

COPY SENT 21/12/18

1) Claim status: Normal/Reject/Private Settle

2) Report Format: TP

3) Survey fee: $400.00

Total: S$ 4,807.45 **Global Sum S$:**

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

Payee 1:	S$ 4,807.45	Name 1:	New Hock Teck Motor Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	