15/5/2010

INS. CASE OWNER: PRIYA | CC 3/III1801 7166, U 7639 | LKK: | IDAC:

ASSIGNMENT

Surveyor: MARCUS DOI: 25/07/18 Date / Time : 14/7/18

Registered in Merimen: 14/7/18

Pre-assign / CCU / FTE

Insured Vehicle No. : SHA 7675G Claim No. : HCT18070513

Name of Insured : LTPL Policy No. : MCDM0015

Insured Tel No. : HP: Make / Model : HYUNDAI

Excess Sec II :S$ D.O.A : 14/7/18 Place of Accident : PIE TWDS EMAS BY EXIT 9.

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

If **NO**, Driver Name / Age : SUHAIMI B ISMAIL OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SLC 6083M →

INSRS:	INSRS:	INSRS:	INSRS:
WSP: CHC	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability : FULLCO	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time	
14/7/18 VIC	SLC 6083M ✓ SHA 7675G ✓
24/07/18	- PICS REQUIRED. OLD REAR-ENDED TP. - SEEK LIABILITY MANDATE TO III. - III AGREED D/S
25/07/18	- EMAIL LIABILITY CLEAR - FINALISED. - ORIGINAL TP LOD IN.
26/10/18	- TYPE REPORT FOR MANDATE APPROVAL - REPORT DONE
10/12/18	- SEEK MANDATE TO III BY CUSTOMER
14/12/18	- III APPROVED MANDATE.
17/12/18	- SEND ACCEPTANCE EMAIL TO TP.
08/01/19	- ORIG. DV IN. 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:	

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: P/P S$ 8,971.00 (6 days) Reduction: 42 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 17/12/18 Confirm with MRCO LOR Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia : COLO REAR-ENDED TP
Repair Cost: (W/GST)	S$ 9,598.97	
Loss of Rental (LOR): (W/GST)	S$ 1,648.20 (7 days) X $180.00	
Loss of Use (LOU):	S$ — ($ 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$ —	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ — (e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ —	3) Survey fee: $600.00
Total:	S$ 10,954.62 **Global Sum S$:** —	

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

Payee 1:	S$ 10,954.62	Name 1:	CHEQUE @ CARRIAGE - FULCO HONDA DEALER PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—