15/5/2010

INS. CASE OWNER: CC 3/CTI1801 3347, G2617. | LKK: | IDAC:

ASSIGNMENT

Surveyor: YGQ DOI: 10/7/18 Date / Time : 10/7/18

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : SJN 7765X Claim No. : SNM18003600 COV

Name of Insured : ZHANG XUERONG. Policy No. : DMPCSM3061511700

Insured Tel No. : _____ HP: 97760899 Make / Model : TOYOTA

Excess Sec II :S$ _____ D.O.A : 10/7/18 Place of Accident : MCE HIGHWAY BY KPE ENTRANCE

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**

SHA 9057C → _____ → _____ → _____

INSRS: CODE WJ. WSP: Tel : Liability : RMKS:

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Date/ Time		STAGE	DATE / PIC
10/7/18 TTH	SHA9057C-Y SJM7765X-Y	Non-Reporting ltr (1st):	
		Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
	OI changing lane and collided with TP	Call OI:	
		After call ltr to OI:	THW 19/9/18 By Email
		Documentation Check List:	**Handler** / **Typist**
		Notification ltr (if non-pickup)	
21/11/18	✓ TP ACCEPTED OFFER.	After call ltr to OI: EMAIL	✓ /
		Authorisation To Act:	✓ /
26/11/18	✓ DV IN. ALL DOCS IN ORDER.	Release Voucher:	✓ /
	✓ TO CLOSE.	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: 10/7/18 Sent By: BEE

FINALIZATION	Date/Time:	Confirm with:		Confirm by:
Repair Cost: L/S	S$ 1,600.00	(3 days) Reduction:	46 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 21/11/18	Confirm with WHATSAPP		Email ✓ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 15		If NO or B 28, Ass. Lia :
Repair Cost (W/EXT)	S$ 1,712.00			
Loss of Rental (LOR):	S$ 442.13	(4.5 days) X $98.25		BELOW $70K MANDATE
Loss of Use (LOU):	S$ 225.00 ($50	x 4.5 days)		
Loss of Income (LOI):	S$ —	($ x days)		
LOR only ☐ LOU only ☐	LOR + LOU ☐	LOR + LO ✓	[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$ —			3) Survey fee: $ 100.00
Total:	S$ 2,386.62	**Global Sum S$:**	2,380.00	
FINAL PAYMENT	Date/Time:	Confirm with:		Email ☐ Call ☐
Payee 1:	S$ 2,380.00	Name 1:	COMFORTDELGRO ENGINEERING PTE LTD	
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—	
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—	