15/5/2010

INS. CASE OWNER: | CC 3/ CTI 180 14751/ K8a3n2 | LKK: | IDAC:

ASSIGNMENT

Surveyor: KSL DOI: 13/8/2018 Date / Time: 13/8/2018

Registered in Merimen: –

Pre-assign / CCU / FTE

Insured Vehicle No. : GY8995L Claim No. : SNM180 2388/C02

Name of Insured : AL'FRESCO ELITE SYSTEM P/L Policy No. : DMCVSN154124702

Insured Tel No. : ____ HP: ____ Make / Model : T-DYNA

Excess Sec II :S$ ____ D.O.A : 10/8/2018 Place of Accident : Slip Rd > Sims Ave

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

If NO, Driver Name / Age : Ganesan Sathayendran OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : 82848079 (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SHB 9522 X → → →

INSRS:
WSP: Trans. Cab
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	- NM/DAI 17004200/44 ; DOA: 1/3/17
23/8 Asher	SHB9522X - CT/MI 170363 /K9bn2 ; DOA: 9/12/17
	GY8995L } NM/CTI 180145 74/44 ; DOA: 10/8/18
	- NM/CTI 160116 77/44 ; DOA: 20/6/16
04.04.19	RECD TP VIDEO SEND. CU: ASHER: 2019) VIDEO SHOW OID TURN TOO CLOSE TO TP AND COLLIDED TP VEHICLE.
09.04.19 @ 3.30	CALLED OID CONFIRMED ACCIDENT. OID MENTION THAT HE WAS REAR ENDED BY THIRD PARTY WHILE TURNING. INFORM TP CLAIM AND VIDEO AGREED TO SETTLE.
09.04.19	FILE PASS TO TYPIST TO PREPARE REPORT.
	- REPORT DONE
06/06/19	- SEEK MANDATE TO CTI BY EMAIL
13/08/19	- CTI APPROVED MANDATE.
	- SEND 1ST OFFER TO TP.
20/08/19	- 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:	ASHER 09.04.19
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: 13/8 Sent By: [signature]

FINALIZATION Date/Time: Confirm with: Confirm by: KSL

Repair Cost: 4S S$2,800 (2 days) Reduction: 86 % Email ✓ Call

FINAL SETTLEMENT Date/Time: 29/08/19 Confirm with WAI YIN Email ✓ Call

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NL	If NO or B 28, Ass. Lia :
Repair Cost: W/4S1	S$ 2,996.00	OID TURN TOO CLOSE TO TP
Loss of Rental (LOR):	S$ 338.63 (4.5 days) x $75.25	
Loss of Use (LOU):	S$ – ($ x days)	
Loss of Income (LOI):	S$ 225.00 ($ 50 x 4.5 days)	
LOR only ☐ LOU only ☐	LOR + LOU ☐ LOR + LOI ☑ [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: $400.00
Total:	S$ 3,567.12 **Global Sum S$:** 3,560.00	

FINAL PAYMENT Date/Time: Confirm with: Email Call

Payee 1:	S$ 3,560.00	Name 1:	TRANS-CAB AUTO SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—