15/5/2010

INS. CASE OWNER: SHORUNI | CC 4 /III1801 5077, A 1639 | LKK: IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 04/09/18 Date / Time : 17/8/18

Registered in Merimen: 20/8/18

Pre-assign / CCU / FTE

Insured Vehicle No. : SHC 1412E Claim No. : HGT18080693

Name of Insured : YDL Policy No. : MLAM0015

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

Excess Sec II :S$ D.O.A : 17/8/18 Place of Accident : PIE TUAS HANGAR

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

If NO, Driver Name / Age : MOHAMAD KIDDU BIN IBRAHIM OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

SLG 8283T → → →

INSRS: WSP: Tel : Liability : RMKS: Kah motor

INSRS: WSP: Tel : Liability : RMKS:

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INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
17/8/18	SLG 8283T – X
	SHC 1412E – 11/3/2018 KEBB OVR. 21/3/19
21/8	
30/08/18	– FILE REVIEWED. OLD REAR-ENDED TP. SEEK LIABILITY MANDATE BY WEEKEND.
31/08/18	– III REQUESTED D/S
05/09/18	– EMAIL LIABILITY CLEAR.
	– REQUEST VIDEO FOOTAGE.
	– TP VIDEO IN. V PRINT/ VIC/ SLG8283T
05/09/18	– TP VIDEO FORWARDED TO III BY EMAIL
	– TO FINALISE COR.
	– FINALISED.
	– ORIGINAL TP LOD IN.
14/11/18	– TPPD REPORT FOR MANDATE APPROVAL.
	– REPORT DONE
27/11/18	– SEEK MANDATE APPROVAL TO III
29/11/18	– III APPROVED MANDATE
13/12/18	– SEND ACCEPTANCE TO TP.
19/12/18	– EV IN. ALL DOCS IN ORDER.

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: REIMBURSE	✓	

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: P/P S$ 1,935.49 (3 days) Reduction: 60 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 14/12/18 Confirm with EMILIAN Email ✓ Call ☐

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

Repair Cost (W/GST) S$ 2,070.97 (OLD REAR-ENDED TP)

Loss of Rental (LOR): S$ — (days)

Loss of Use (LOU): S$ 150.00 ($ 50 x 3 days)

Loss of Income (LOI): S$ — ($ x days)

LOR only ☐ LOU only ✓ LOR + LOU ☐ LOR + LO ☐ **[Tick only one]**

GIA/LTA Search S$ —

Medical: S$ — 1) Claim status: Normal/Reject/Private Settle

Disbursement (COPYING) S$ 230.00 (e.g. Tow/ Independent) 2) Report Format:

Legal Cost S$ — 3) Survey fee: $ 350.00

Total: S$ 2,450.97 **Global Sum S$:** —

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

Payee 1:	S$ 2,450.97	Name 1:	KAH MOTOR CO. SDN. BHD.
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—