5/5/2010

INS. CASE OWNER: CC 4 / AIG 180 1564S / KWB

LKK:

IDAC:

ASSIGNMENT

Surveyor: Kenneth DOI: 28/8/18 Date / Time: 27/8/2018

Registered in Merimen: 28/8/2018

Pre-assign / CCU / FTE

Insured Vehicle No. : SGP 7338M

Name of Insured : HAN JUAT HOON

Insured Tel No. : HP:

Excess Sec II :S$ D.O.A : 25/8/2018

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

If **NO**, Driver Name / Age : Ong 24 XUAN, THADDEUS

Driver Tel No. : 9735 7129 (V/L: YES / NO)

Claim No. :

Policy No. : 210019924

Make / Model : M-BENZ E350

Place of Accident : LORNIE RD

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % **Final ? Yes / No**

SJV 2514L →

INSRS:	INSRS:	INSRS:	INSRS:
WSP: Complete VMS	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time	
28/8 NC	SJV 2514L - X ; SGP 7338M - X
	- INTERCEPT DOWN
08/10/18 @ 5:32PM	- SPOKE TO OID. OI WAS THE FRIEND. HE CONFIRMED NO PERSON INVOLVED. OI IS A FAMILY FRIEND. HE ALSO CONFIRMED ACCIDENT DETAILS & WHO WAS AT FAULT WHEN ACCIDENT HAPPEN. INFORMED TP CLAIM & LIABILITY, ACCESS TO OFFICE & ANSWER NCD ISSUES.
09/10/18	- SEND LETTER TO OI.
	- FINALISED
	- TP LOD IN BY EMAIL
04/04/19	- SOUND 1ST OFFER TO TP.
	- 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:	08/10/18 - VC
After call ltr to OI:	09/10/18 - VC

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: L/S S$ 6000.00 (11 days) Reduction: 5% Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 04/04/19 Confirm with LILY Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. :	If NO or B 28, Ass. Lia :
Repair Cost: (W/GOD)	S$ 6,420.00	(OLD WORKING UNTOKEN)
Loss of Rental (LOR):	S$ 1,200.00 (12 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 + LOI ☐ [Tick only one]		
GIA/LTA Search	S$ 36.50	
Medical:	S$ –	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ – (e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ –	3) Survey fee: $320.00
Total:	S$ 7,656.50 **Global Sum S$:** 7,600.00	

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

Payee 1:	S$ 7,600.00	Name 1:	COMPLETE VMS PTE LTD
Payee 2: (Strike if N.A.)	S$ –	Name 2:	–
Payee 3: (Strike if N.A.)	S$ –	Name 3:	