15/5/2010

INS. CASE OWNER: | CC 7/CTI1801 6918 , F2J61 n2 | LKK: IDAC:

ASSIGNMENT

Surveyor: Falvin DOI: 14/9/18 Date / Time: 14/9/18

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : SJY 257B. Claim No. : SWM18D0446OCUV

Name of Insured : WONG HANG TANG. Policy No. : DMPCSND14874718O3

Insured Tel No. : HP: 91868618 Make / Model : TOYOTA

Excess Sec II :S$ D.O.A : 14/9/18 Place of Accident : GOMBAK DR SHP RD TWDS UPP BT TIMAH RD

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**

SHL 64 AC →

INSRS: WSP: premier Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

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INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
14/9/18 JOY.	SHL 64 AC — CS/MSG18010445/EVDRY DUE 30/11/18 SJY 257B — X
1-11-18	@ 1027 W/ OI. CONFIRMED ACC. AGREED & AWARE NCD ISSUE.
	14-11-18 @ 914 am W/ OI. HE RECEIVED LAWYER LETTER.
	RECEIVED 16 NOV 2018

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	JOY 1-11-18
After call ltr to OI:	

Documentation Check List:	Handler	Typist
Notification ltr (if non-pickup)	X	
After call ltr to OI:	✓	
Authorisation To Act:	✓	
Release Voucher:	✓	
Final Repair Bill:	✓	
Car Rental Invoice:	✓	
Towing Invoice	✓	
LTA / GIA :	✓	
Medical Bill:	X	
PIR:	X	
Mandate/Reject Instruction:	X	
LOD	✓	
Payment Breakdown Form:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: S$ (days) Reduction: % Email Call

FINAL SETTLEMENT Date/Time: 13-11-18 Confirm with GARY Email Call

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: GST	S$ 1,712	
Loss of Rental (LOR):	S$ 410.88 (4 days) 102.72	COPY SENT 16/11/18
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$ 2.X	
Medical:	S$ —	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ — (e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$	3) Survey fee:
Total:	**S$** 2,124.88 **Global Sum S$:**	

FINAL PAYMENT Date/Time: Confirm with: Email Call

Payee 1:	S$ 2,124.88	Name 1:	PREMIER AUTOMOTIVE SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$ X	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	X