15/5/2010

INS. CASE OWNER: NORGIAH | CC 4 / AIG 180 1702K / Kha3 | LKK: | IDAC:

ASSIGNMENT

Surveyor: KSC DOI: 19/9/18 Date / Time: 19/9/18

Registered in Merimen: 18/9/18

Pre-assign / CCU / FTE

Insured Vehicle No. : SJY9475D

Name of Insured : HARIYONO B. SUJONTA

Insured Tel No. : HP: 91709839

Excess Sec II :S$ D.O.A : 14/09/2018

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

If NO, Driver Name / Age :

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

Claim No. : 6750627529SG

Policy No. : 240023247

Make / Model : KIA CERATO

Place of Accident : SLE EXIT BKE

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

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

SLN9802C →

INSRS:	INSRS:	INSRS:	INSRS:
WSP: BH Auto.	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time	
19/9	SLN9802C - X ; SJY9475D - X
27/09/18 @ 9:55AM	- SPOKE TO OI. CONFIRMED ACCIDENT DETAILS & REAR-ENDED TP. INFORMED TP CLAIM, AGREED TO OBTAIN & ADVISE ACD RATES. ADVISED LETTER & EMAIL TO OI. - EMAIL LIABILITY CLEAR - FINALISED - ORIGINAL TP LOD IN
29/11/18	- SENT 1ST OFFER TO TP. - TP ACCEPTED OFFER. DV IN. - 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:	27/09/18 - VK
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: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: L/S S$ 2,300.00 (6 days) Reduction: 77 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 29/11/18 Confirm with SACELYN Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: (w/GST)	S$ 2,461.00	COI REAR-ENDED TP
Loss of Rental (LOR) (w/GST)	S$ 321.00 (6 days) x $50 COPC)	
Loss of Use (LOU):	S$ — ($ x days)	
Loss of Income (LOI):	S$ — ($ x days)	
LOR only ✓ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S$ 2.00	
Medical:	S$ —	
Disbursement:	S$ — (e.g. Tow/ Independent)	1) Claim status: Normal/Reject/Private Settle
Legal Cost	S$ —	2) Report Format:
Total:	S$ 2,784.00 **Global Sum S$:** —	3) Survey fee: $320.00

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

Payee 1:	S$ 2,784.00	Name 1:	BH AUTO SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—