15/5/2010

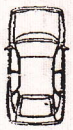
INS. CASE OWNER: CC ₵/EQI1801 9365, 72639/2 | LKK: | IDAC:

ASSIGNMENT

Surveyor: Tmtech. DOI: 22/10/18 Date / Time : 22/10/18.

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SFZ 6845H.

Name of Insured : QUEK LAY TIEW.

Insured Tel No. : HP:

Excess Sec II :S$ D.O.A : 22/10/18.

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

Claim No. :

Policy No. : MMPPMC18-006408.

Make / Model : MITSUBISHI.

Place of Accident : SEMBAWANG RD & WOODLANDS AVE 3 junc

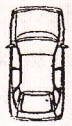
If **NO**, Driver Name / Age :

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

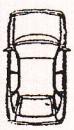
OI GIA REPORT: YES / NO : TP GIA REPORT: YES / NO

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

SLJ 70536G →

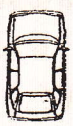


INSRS:
WSP: Chuan Lee Hin.
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
20/10/18 VIC	SLJ705MG-Y SFZ6845H-Y
07/11/18 @ 11:01AM	- SPOKE TO OI. CONFIRMED ACCIDENT DETAILS & REAR-ENDED TP. INFORMED TP CLAIM, AGREED TO SETTLE & ADVISE NCD ISSUES. SEND LETTER & EMAIL TO OI.
	- EMAIL LIABILITY CLAIM
	- FINALISED.
	- TP LOU IN BY EMAIL
14/01/19	- TYRE REPORT FOR MANDATE APPROVAL
	- REPORT DONE
29/01/19	- SEEK MANDATE TO EQ.
20/03/19	- EQ APPROVED MANDATE
29/03/19	- SEND 1ST OFFER TO TP.
	- TP ACCEPTED OFFER. NO BV.
	- 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:	07/11/18 - VIC

Documentation Check List:	Handler	Typist
Notification ltr (if non-pickup)		
After call ltr to OI:	✓	
Authorisation To Act:	✓	
Release Voucher: NO BV		
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: 26/10/18 Sent By: LS

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: LG S$ 6,000.00 (7 days) Reduction: 5G % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: Confirm with KAIDEN Email ✓ Cal ☐

Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: CW/GOT	S$ 6,420.00		(OI REAR-ENDED TP)
Loss of Rental (LOR) GI/GOT	S$ 1,733.40 (9 days)	x $180	HIT SIDE MOST
Loss of Use (LOU):	S$ — (S x days)		
Loss of Income (LOI):	S$ — (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:	S$ —	(e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ —		3) Survey fee: $450.00
Total:	S$ 8,153.40	**Global Sum S$:** 8,150.00	

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

Payee 1:	S$ 8,150.00	Name 1:	CHUAN LEE HIN TYRES & AUTOMOTIVE SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—