15/5/2010

INS. CASE OWNER: | CC? /CTI1801 9426, FLJ63n2 | LKK: | IDAC:

ASSIGNMENT

Surveyor: Falvin | DOI: 14/10/18 | Date / Time . 14/10/18

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. :	SJK 7997B.	Claim No. :	SWM18DG08UCV
Name of Insured :	ENG JM HOCK	Policy No. :	DMP2CSNG8 3DG2800
Insured Tel No. :	HP:	Make / Model :	HONDA.
Excess Sec II :S$	D.O.A : 14/10/18	Place of Accident :	UPP THOMSON ROAD KT
Is driver the owner? (YES / NO)	Nature of Accident :		
If **NO**, Driver Name / Age : AGNES ENG XI YN.		OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO	
Driver Tel No. :	(V/L: YES / NO)	Insured Liability : %	**Final ? Yes / No**

SHO 3601E → → →

INSRS: LOGE WSP: Ing. Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time			
	SHO 3601E - F SJK7997B - F	**STAGE**	**DATE / PIC**
14/10/18		Non-Reporting ltr (1st):	
poy.		Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
@	945 called OI & OD 2x - NO ANS.	Call OI:	JOY 14-12-18
		After call ltr to OI:	
@	10:30 called OI & OD no ans.	**Documentation Check List: Handler Typist**	
		Notification ltr (if non-pickup)	☒ ☐
14-12-18	@1055 OI CALLED - AGREED & AWARE NCD ISSUE	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:	☐
PRELIMINARY ADVICE Date/Time:	Sent By:	Post-Repair Photos:	☐ ☐
		Others:	☐ ☐

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost:	S$ (days) Reduction: %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 14-12-18	Confirm with WILLIAM	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :
Repair Cost: GST	S$ 871.46		COPY SENT 14/12/18
Loss of Rental (LOR):	S$ 188.10 (1.5 days) 125.40		
Loss of Use (LOU):	S$ — (S$ x days)		
Loss of Income (LOI):	S$ 75 (S$ 50 x 1.5 days)		
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LO ☐ [**Tick only one**]			
GIA/LTA Search	S$ 7.49		
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$ 1,142.05	**Global Sum S$:** 1142.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 1,142.00	Name 1: COMFORTDELGRO ENGINEERING PTE LTD	
Payee 2: (Strike if N.A.)	S$ ✗	Name 2: ✗	
Payee 3: (Strike if N.A.)	S$	Name 3:	