15/5/2010

PIC CASE OWNER: AIDA | CC 3, III 180 20824, Klha3 | LKK: | DAC:

ASSIGNMENT

Surveyor: AWK DOI: 12/11/18 Date / Time: 12/11/18

Registered in Merimen: 13/11/18

Pre-assign / CCU / FTE

Insured Vehicle No. : SHA7231D

Name of Insured : LTPL

Insured Tel No. : HP:

Excess Sec II :S$ D.O.A : 11-11-18

Is driver the owner? (YES / NO)

If NO, Driver Name / Age :

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

Claim No. : HCT 18110310

Policy No. :

Make / Model :

Place of Accident : AIRPORT BLVD

Nature of Accident :

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

Insured Liability : % Final ? Yes / No

DLS

SHC 6856 J →

INSRS:	INSRS:	INSRS:	INSRS:
WSP: Premier	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time	
20/11	SHC 6856 J - X ; SHA 7231D - X
27-11-18	FOR MANDATE
	- MANDATE APPROVED
	- SEND ACCEPTANCE EMAIL TO TP.
	- ORIGINAL POCB IN.
	- ALL 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:	
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: Llo S$ 1,650.00 (2 days) Reduction: 63 % Email [ ] Call [ ]

FINAL SETTLEMENT Date/Time: 15/07/19 Confirm with SHAFAQAT Email ✓ Call [ ]

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :
Repair Cost: GST	S$ 1,444.50		COD REAR-ENDED (D)
Loss of Rental (LOR):	S$ 308.16 (3 days) $102.72		
Loss of Use (LOU):	S$ — ($ x days)		
Loss of Income (LOI):	S$ — ($ x days)		
LOR only ✓ LOU only [ ]	LOR + LOU [ ] LOR + LOI [ ] [Tick only one]		
GIA/LTA Search	S$ —		
Medical:	S$ —		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ — (e.g. Tow/ Independent)		2) Report Format:
Legal Cost	S$ —		3) Survey fee: $350.00
Total:	S$ 1,752.66 Global Sum S$: —		

FINAL PAYMENT Date/Time: Confirm with: Email [ ] Call [ ]

Payee 1:	S$ 1,752.66	Name 1:	PREMIER AUTOMOTIVE SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—