12/5/2020

INS. CASE OWNER:

CC 4, 001 180 22315, R, ha34/v

LKK:

IDAC:

ASSIGNMENT

Surveyor: RASUL

DOI: 13/12/18

Date / Time : 6/12/18

Registered in Merimen: –

Pre-assign / CCU / FTE

Insured Vehicle No. : FBK 1083Y

Name of Insured : Ban Hock Hin Co P/L

Insured Tel No. :

HP:

Excess Sec II :S$

D.O.A : 6/12/18

Is driver the owner? (YES / NO) [NO circled]

If NO, Driver Name / Age : NOR Aisy'ani B. Yusoff

Driver Tel No. : 81872124 (V/L: YES / NO) [YES circled]

Claim No. :

Policy No. :

Make / Model :

Place of Accident : Bedok north rd

Nature of Accident :

OI GIA REPORT: YES / NO [YES circled] ; TP GIA REPORT: YES / NO [YES circled]

Insured Liability : 0 %

Final ? Yes / No

SFM3636G → → →

INSRS: WSP: Stuttgart. Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
13/12	SFM3636G - CC4/M1/18003609/SHL63 ; DOA: 6/12/18
ML	FBK1083Y, MA/MC/17012334/KH ; DOA: 6/09/2017
13/12/18	- FILE REVIEWED. OI REAR-ENDED TO TP. SEND LETTER W EMAIL TO OI/OID TO NOTIFY TP CLAIM W NCD ISSUES.
	- EMAIL LIABILITY CLEAR
	- FINALISED
	- TP LOD IN BY EMAIL
01/04/19	- TYPE REPORT FOR MANDATE APPROVAL
31/5/19	- SETTLED $10,167.83 WITH TP, PROCEED TO CLOSE
	- 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:	13/12/18 - OIC

Documentation Check List:	Handler	Typist
Notification ltr (if non-pickup)		
After call ltr to OI:	✓	
Authorisation To Act:	✓	
Release Voucher: NO DV		
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: 17/12/18 Sent By: 93

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: P/P S$ 8,753.11 (4 days) Reduction: 21 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 31/05/19 Confirm with TOMMY Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) [Agreed circled] BOLA S/N No. : 27	If NO or B 28, Ass. Lia : (OI REAR-ENDED TP)
Repair Cost: (W/GST)	S$ 9,365.83	
Loss of Rental (LOR):	S$ – (days)	
Loss of Use (LOU):	S$ 800.00 ($160 x 5 days)	
Loss of Income (LOI):	S$ – ($ x days)	
LOR only ☐ LOU only ☑ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S$ 2.00	
Medical:	S$ –	1) Claim status: Normal/Reject/Private Settle [Normal circled]
Disbursement:	S$ – (e.g. Tow/ Independent)	2) Report Format: IP
Legal Cost	S$ –	3) Survey fee: $400
Total:	S$ 10,167.83	**Global Sum S$:**

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

Payee 1:	S$ 10,167.83	Name 1: STUTTGART AUTO PTE LTD
Payee 2: (Strike if N.A.)	S$ –	Name 2: –
Payee 3: (Strike if N.A.)	S$ –	Name 3: –