15/5/2010

INS. CASE OWNER: | CC 4/EQI1802 3262 / K2 M63 | LKK: IDAC:

ASSIGNMENT

Surveyor: Kamal | DOI: 2/1/19 | Date / Time 28/1/19
Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. :	GBF 5545G	Claim No. :	OM1871004541
Name of Insured :	SCM PRODUCTION P/L	Policy No. :	OMCPM18V01368
Insured Tel No. :	HP:	Make / Model :	MITSUBISHI
Excess Sec II :S$	D.O.A : 20/12/18	Place of Accident :	UPP THOMSON RD.
Is driver the owner? (YES / NO)	Nature of Accident :	OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO	
If **NO**, Driver Name / Age :	CHUA GIN CHUAN	Insured Liability : %	**Final ? Yes / No**
Driver Tel No. :	(V/L: YES / NO)		

SLN8247L → → →

INSRS: WSP: Tel : Liability : RMKS: volkswagen	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SLN8247L – V
16/1/19	GBF5545G – W1/A119701948 W4 DM+14/01/19
VZ	– FINALISED
11/02/19	– FILE REVIEWED. OID REAR-ENDED TP. SEND LETTER TO OI TO NOTIFY TP CLAIM & NCD ISSUES.
11/02/19	– TYPE REPORT WHILE PENDING LOD – REPORT DONE
	– TP LOD IN BY EMAIL MANDATE APPROVED
4/6/19	PROCEED TO CLOSE AS AMOUNT SAME WITH LOD
	– TP ACCEPTED OFFER. – 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:	
After call ltr to OI:	11/02/19 – VK

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: 07/01/19 Sent By: VZ

FINALIZATION Date/Time: Confirm with: Confirm by:
Repair Cost: P/P S$ 11,784.19 (8 days) Reduction: 45 % Email ☐ Call ☐

FINAL SETTLEMENT	Date/Time: 4/6/19 Confirm with Meiy Wong	Email ✓ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: CW/GST	S$ 12,609.08	COD REAR-ENDED TP)
Loss of Rental (LOR):	S$ 720.00 (6 days) X $120.00	
Loss of Use (LOU):	S$ – (S$ x days)	ORIGINAL TP LOD W/EQ
Loss of Income (LOI):	S$ – (S$ x days)	
LOR only ✓ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐	**[Tick only one]**	
GIA/LTA Search	S$ 2.00	1) Claim status: Normal/Reject/Private Settle
Medical:	S$ –	2) Report Format: TP
Disbursement:	S$ – (e.g. Tow/ Independent)	3) Survey fee: $400
Legal Cost	S$ –	
Total:	**S$** 13,331.08 **Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 13,331.08	Name 1:	VOLKSWAGEN CENTRE SINGAPORE
Payee 2: (Strike if N.A.)	S$ –	Name 2:	–
Payee 3: (Strike if N.A.)	S$ –	Name 3:	–