15/5/2010

INS. CASE OWNER: LEE LING YAO | CC 4 /AIG1900 1442 / K463 | LKK: IDAC:

ASSIGNMENT

Surveyor: KGC
DOI: 9/1/19
Date / Time : 21/1/19
Registered in Merimen: 21/1/19.

Pre-assign / CCU / FTE

Insured Vehicle No. : SLH 9970C.
Name of Insured : TAN XIAO YI
Insured Tel No. :
HP:
Excess Sec II :S$
D.O.A : 14/1/19.
Is driver the owner? (YES / NO) — NO circled
If NO, Driver Name / Age : LO YONG HUEI
Driver Tel No. :
(V/L: YES / NO) — YES circled

Claim No. : 9770852686759
Policy No. : 7100490084-02
Make / Model : CITROEN
Place of Accident : AYE Twds KEPPEL RD
Nature of Accident :
OI GIA REPORT: YES / NO (YES circled) ; TP GIA REPORT: YES / NO (YES circled)
Insured Liability : %
Final ? Yes / No

SLR 445T → → →

INSRS:	INSRS:	INSRS:	INSRS:
WSP: AH LIM.	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time		
	SLR 445T - X SLH 9970C - X	
20/1/19 9:14.	- TP VIDEO UPLOADED IN MERIMEN	
07/08/19	- FILE REVIEWED. OID REAR-ENDED TP. ON 29.01.19, OID CALLED IN. OI WAS HIS WIFE. CONFIRMED ACCIDENT DETAILS & REAR-ENDED TP. EMAIL WAS SENT OUT TO OI.	
	- TP LOD IN.	
07/08/19	- SEND ACCEPTANCE EMAIL TO TP	
	- RECEIVED FOCO. 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:	29-1-19 - JY

Documentation Check List:	Handler	Typist
Notification ltr (if non-pickup)		
After call ltr to OI: EMAIL	✓	
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: LG	S$ 2,750.00 (4 days)	Reduction: 40 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 07/08/19	Confirm with MUI HONG	Email ✓ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia : (OID REAR-ENDED TP)
Repair Cost: (W/GST)	S$ 2,942.50		
Loss of Rental (LOR):	S$ 400.00	(4 days) x $100.00	
Loss of Use (LOU):	S$ —	($ x days)	
Loss of Income (LOI):	S$ —	($ x days)	
LOR only ✓	LOU only ☐	LOR + LOU ☐ LOR + LOI ☐ **[Tick only one]**	
GIA/LTA Search	S$ 2.00		
Medical:	S$ —		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ —	(e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ —		3) Survey fee: $310.00
Total.	S$ 3,344.50	**Global Sum S$:** —	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 3,344.50	Name 1: AH LIM MOTOR COMPANY	
Payee 2: (Strike if N.A.)	S$ —	Name 2: —	
Payee 3: (Strike if N.A.)	S$ —	Name 3: —	