15/5/2010

				LKK:
INS. CASE OWNER: Daniel Pool	CC 4, 111 1900 1678 , T/Ru3q 9			IDAC:

ASSIGNMENT

Surveyor: Tauflch   DOI: 5/3/2019   Date / Time: 25/01/19

Registered in Merimen: 25/01/19

Pre-assign / CCU / FTE

Insured Vehicle No. : SHC 1084R

Name of Insured : CPK   Claim No. : _____

Insured Tel No. : _____ HP: _____   Policy No. : _____

Excess Sec II :S$ _____ D.O.A : 23/01/19   Make / Model : _____

Is driver the owner? (YES / (NO))   Place of Accident : YCK MRT Taxi Stand

Nature of Accident : _____

If NO, Driver Name / Age : _____

Driver Tel No. : _____   OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

(V/L: YES / NO)   Insured Liability : ___ %   Final ? Yes / No

SMD 3030T →

INSRS: WSP: CkC Tel: Liability: RMKS:

INSRS: WSP: Tel: Liability: RMKS:

INSRS: WSP: Tel: Liability: RMKS:

INSRS: WSP: Tel: Liability: RMKS:

Date/ Time		STAGE	DATE / PIC
24/1	SMD 3030T - X;	Non-Reporting ltr (1st):	
CPK	SHC1084R - CU4/111 150 17660/U0b3q2 ; DOA 16/4/15	Non-Reporting ltr (2nd):	
	- CU4/111 150 20633/Pb3 XR ; DOA 29/11/16	Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
19/2/2019	Seek mandate BOLA 26 - Approved	Call OI:	
		After call ltr to OI:	
27/8 - Pending TP rental invoice.		**Documentation Check List:**	Handler Typist
31/10 - File pass RT type report.		Notification ltr (if non-pickup)	X
26/11 - Pending mandate approval of $4105.59.		After call ltr to OI:	X
2/12 - Offer $4105.59 (pending acceptance).		Authorisation To Act:	✓
13/1 - Settle @ $4105.59. File pass su li send DV.		Release Voucher:	✓
8/1 - DV in, file pass mk to close (WFH bant).		Final Repair Bill:	✓
		Car Rental Invoice:	✓
		Towing Invoice:	X
		LTA / GIA :	X
		Medical Bill:	X
		PIR:	X
		Mandate/Reject Instruction:	✓
		LOD	✓
		Payment Breakdown Form:	

PRELIMINARY ADVICE Date/Time: 11/3/2019   Sent By: CPK

Post-Repair Photos: X
Others: X

FINALIZATION Date/Time: _____   Confirm with: _____   Confirm by: Tauflch

Repair Cost: P/P S$ 3133.00 (4 days) Reduction: 4840 % 21   Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 9/1/2020. Confirm with: Larry.   Email ☑ Call ☐

Final Liability : % 100 (Agreed / Assessed) BOLA S/N No. : 26   If NO or B 28, Ass. Lia :

Repair Cost: (W/GST) S$ 3356.59   OI passenger open door

Loss of Rental (LOR): S$ 749.00 (7 days) X $107

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: TP

Legal Cost: S$ —   3) Survey fee: $350.00.

Total: S$ 4105.59. Global Sum S$:

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

Payee 1: S$ 4105.59   Name 1: Cycle & Carriage Kia Pte Ltd

Payee 2: (Strike if N.A.) S$ Name 2:

Payee 3: (Strike if N.A.) S$ Name 3: