15/5/2010

INS. CASE OWNER: JACLYN | CC 3/AIG1900 1827/E/[illegible] | LKK: IDAC:

ASSIGNMENT

Surveyor: STEVE | DOI: 20/02/19 | Date / Time : 28/1/19

Registered in Merimen: 28/1/19

Pre-assign / CCU / FTE

Insured Vehicle No. :	SLP 7792A	Claim No. :	8177 7767 6797569
Name of Insured :	FAESAL BIN AHMAD SAID BIN TALIB	Policy No. :	21005 10216 -01
Insured Tel No. :	HP:	Make / Model :	MAZDA
Excess Sec II :S$	D.O.A : 24/1/19	Place of Accident :	JUNC OF SIGLAP RD & EAST COAST RD
Is driver the owner? (YES / NO)	Nature of Accident :		
If **NO**, Driver Name / Age :		OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO	
Driver Tel No. :	(V/L: YES / NO)	Insured Liability : %	**Final ? Yes / No**

SJN 2271C → → → →

INSRS: WSP: performance Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SJN2271C-X SLP7792A-X
	- FINALISED
	- ORIGINAL TP LOD IN
30/01/19 @ 1120AM	- JOY SPOKE TO OI. INFORMED ABOUT TP CLAIM & NCD ISSUES.
26/06/19	- SEND 1ST OFFER TO TP.
27/06/19	- 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:	30/01/19 - JOY
After call ltr to OI:	26/06/19 - VIC

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: P/P	S$ 2,710.85 (3 days)	Reduction: 17 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 27/06/19	Confirm with CAROLINE	Email ✓ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: (w/ GST)	S$ 2,900.61		COI REAR-ENDED TP)
Loss of Rental (LOR):	S$ — (days)		
Loss of Use (LOU):	S$ 180.00 S$ 60 x 3 days)		
Loss of Income (LOI):	S$ — (S$ x days)		
LOR only ☐ LOU only ☐	LOR + LOU ☐ LOR + LO ☐	**[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: $320.00
Total:	S$ 3,082.61	**Global Sum S$:** —	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 2,902.61	Name 1: PERFORMANCE MOTORS LIMITED	
Payee 2: (Strike if N.A.)	S$ 180.00	Name 2: LAW SEOW KHIM	
Payee 3: (Strike if N.A.)	S$ —	Name 3: —	