15/5/2010

BNS. CASE OWNER: CC 4 / QBE 1900 2023 , R1 ~~f930~~ h

LKK:

IDAC:

ASSIGNMENT

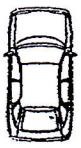
Surveyor: RAJU

DOI: 13/12/19

Date / Time: 29/1/19

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : SLS 3895Y

Name of Insured : ODEUA LIMA JIA TIMA

Insured Tel No. : HP:

Excess Sec II :S$ D.O.A : 12/01/19

Is driver the owner? (YES / NO)

If **NO**, Driver Name / Age :

Driver Tel No. : (V/L: YES / NO)

Claim No. : VC012234

Policy No. :

Make / Model :

Place of Accident :

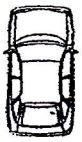
Nature of Accident :

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

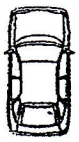
Insured Liability : % **Final ? Yes / No**

PA 6290 U →

INSRS:
WSP: UCO Eng.
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
28/2	PA 6290 U. X ; SLS 3895Y. W2/ALL 7219118/PA/6397 ; DOA. 30/01/19
CAL	
04/09/19	- FILE REVIEWED. OID FILTERED CANE. SEND LETTER & EMAIL TO OI TO NOTIFY TP CLAIM & NCD ISSUES.
	- FINALIZED
	- TP LOD IN BY EMAIL
06/09/19	- TYPE REPORT FOR MANDATE APPROVAL
	- REPORT DONE
01/10/19	- SEEK MANDATE APPROVAL TO QBE
15/01/2020	- QBE APPROVED MANDATE. SEND SET OFFER
22/01/2020	- 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:	04/09/19 - JIC

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: 18/02/19 Sent By: 93

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: L/S S$ 1,000.00 (4 days) Reduction: 26 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 18/01/20 Confirm with AH QIANG Email / Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 15	If NO or B 28, Ass. Lia : (OID SWERVED CANE)
Repair Cost: (w/GST)	S$ 1,070.00	
Loss of Rental (LOR):	S$ — (days)	
Loss of Use (LOU):	S$ 600.00 ($ 150 x 4 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: $400.00
Total:	S$ 1,672.00 **Global Sum S$:** —	

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

Payee 1:	S$ 1,672.00	Name 1:	UCO ENGINEERING PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—