15/6/2010

INS. CASE OWNER: CHAN KAH MENG | CC 3 / AG 1900 2817 / AH 03 | LKK: IDAC:

ASSIGNMENT

Surveyor: LWP DOI: 25/7/19 Date / Time : 14/2/19

Registered in Merimen: 14/2/19

Pre-assign / CCU / FTE

Insured Vehicle No. : SKJ9133H Claim No. : 9815908518 9G

Name of Insured : Tracey Yuen Chih-Chian Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A 5/7/2019 Place of Accident :

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**

SBW 1287B → → →

INSRS: WSP: Premium Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SBW 1287B - X ; SKJ9133H - X
28/2	OI MR. sent out 1st letter.
	- TP VIDEO UPLOADED IN MERIMEN
	8-3-19 @ 525 W/ OI TRACEY. HE CONFIRMED. AGREED & AWARE NCD ISSUE.
	0 DAYS
	- TP LOD IN BY EMAIL
22/08/19	- SIGNED ACCEPTANCE EMAIL TO TP
	- 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:	JUY 8-3-19
After call ltr to OI:	

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: P/P S$ 1,945.60 (3 days) Reduction: 70 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 22/08/19 Confirm with KOWIN Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: (W/GST)	S$ 2,081.79	OI REQUESTED TP
Loss of Rental (LOR):	S$ (days)	
Loss of Use (LOU):	S$ 180.00 ($ 60 x 3 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: $320.00
Total:	S$ 2,263.79 **Global Sum S$:**	

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

Payee 1:	S$ 2,083.79	Name 1:	PREMIUM AUTOMOBILES PTE LTD
Payee 2: (Strike if N.A.)	S$ 180.00	Name 2:	PHUA HWEE CHAY DERRICK
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—