

ASSIGNMENT

Surveyor:

imp

DOI:

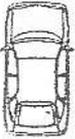
14/2/19

Date / Time:

14/2/19

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : GBA 5793H
Name of Insured : Technocrete pte
Insured Tel No. : HP:
Excess Sec II : \$\$ D.O.A : 9/2/19
Is driver the owner? (YES / NO) Nature of Accident :

Claim No. : 1811919 / VC05 / 02142
Policy No. :
Make / Model :
Place of Accident :

If NO, Driver Name / Age :

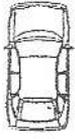
Driver Tel No. :

(V/L: YES / NO)

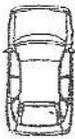
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability: % Final ? Yes / No

60F 1324



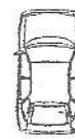
INSRS: WSP: Kai Motor
Tel:
Liability:
RMKS:



INSRS: WSP:
Tel:
Liability:
RMKS:



INSRS: WSP:
Tel:
Liability:
RMKS:



INSRS: WSP:
Tel:
Liability:
RMKS:

Date / Time

STAGE

DATE / PIC

19/3
509

ADP 1324 - 02/11/19 1700 9287 / K1K392 : WSP 9/15/19
GAS 5793H 3 NA / M67009287 / K1K392 : WSP 9/15/19

- FINANCED.

- TP REPORT FOR MANDATE APPROVAL

08/04/19

- REPORT DONE

13/08/19

- SEND MANDATE APPROVAL TO LPC.

15/08/19

LOD IN. TO CHECK W/ MK
- LPC APPROVED MANDATE
- SEND 1ST OFFER TO TP.

17/10/19

- TP REJECTED OFFER. COUNTER OFFER
LOU @ \$125 / DAY. RESEND MANDATE.

21/10/19

- LPC MAINTAIN. MAINTAIN OFFER TO TP
- TP ACCEPTED OFFER

Table with columns for STAGE and DATE / PIC. Rows include Non-Reporting ltr (1st), Non-Reporting ltr (2nd), Non-Reporting ltr (Final), Notification ltr (if non-pickup), Call OI, After call ltr to OI, Documentation Check List, Authorization 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: 02/10/19

Sent By: JOY

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost: L19 \$\$\$ 5,530.00 (6 days) Reduction: 35 % Email Call

FINAL SETTLEMENT

Date/Time: 21/10/19

Confirm with

NS KYM

Email Call

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No.: 27
Repair Cost: (w/acc) \$\$\$ 5,724.50
Loss of Rental (LOR): \$\$\$ 800.00 (8 days) x \$100.00
Loss of Use (LOU): \$\$\$ - (\$ x days)
Loss of Income (LOI): \$\$\$ - (\$ x days)
LOR only LOR + LOU LOR + LOI [Tick only one]

GIA/LTA Search \$\$\$ 7.45
Medical: \$\$\$ -
Disbursement: \$\$\$ - (e.g. Tow/ Independent)
Legal Cost \$\$\$ -
Total: \$\$\$ 6,531.95 Global Sum \$\$\$: 6,530.00

If NO or B 28, Ass. Lia :
COLD REPAIR-BONDED TP)

COPY SENT

1) Claim status: Normal/Reject/Private Settle
2) Report Format:
3) Survey fee: \$ 450.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email Call

Payee 1: \$\$\$ 6,530.00 Name 1: KAI MOTOR TRADING
Payee 2: (Strike if N.A.) \$\$\$ - Name 2:
Payee 3: (Strike if N.A.) \$\$\$ - Name 3: