15/5/2010

INS. CASE OWNER: | CC 6/EQI 1900 3082 / Kha3 | LKK: IDAC:

ASSIGNMENT

Surveyor: KSL DOI: 18/2/19 Date / Time : 18/2/19

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : GBH 5471 A		Claim No. :	
Name of Insured : 1 WERKZ P/L		Policy No. :	
Insured Tel No. :	HP:	Make / Model :	
Excess Sec II :S$	D.O.A : 1/2/19	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**

SJP 4066 G → ______ → ______ → ______

INSRS: WSP: Wei Lee Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
1/3 VIC	SJP 4066 G - CU6 (AGL) 2017751 (USAJY IDOA: 28/6/17) S1437849 Z - X
	- FINALIZED - TP LOD IN BY EMAIL
14/06/19	- FILE RECEIVED. OID INVOLVED IN A 3 VEH. C.C.; OID 2ND CAR. SEND LETTER TO OI TO NOTIFY TP CLAIM 4 NCD ISSUES.
10/05/19	- SEND 1ST OFFER TO TP. - TP ACCEPTED OFFER. NO DV. - 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:	14/03/19 - VIC

Documentation Check List:	Handler	Typist
Notification ltr (if non-pickup)		
After call ltr to OI:	✓	
Authorisation To Act:	✓	
Release Voucher: NO DV		
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: 19/02/19 Sent By: 93

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost:	S$ 1,200.00 (4 days)	Reduction: 74 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 10/05/19	Confirm with KAREN	Email ✓ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0%
Repair Cost: CU/GST	S$ 1,284.00		(3 VEH. C.C.; OID 2ND CAR)
Loss of Rental (LOR):	S$ — (days)		
Loss of Use (LOU):	S$ 240.00 ($ 60 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$ 7.45		
Medical:	S$ —		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ —	(e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ —		3) Survey fee: $400.00
Total:	S$ 1,531.45	**Global Sum S$:** —	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 1,531.45	Name 1: WEI LEE MOTOR WORKS	
Payee 2: (Strike if N.A.)	S$ —	Name 2: —	
Payee 3: (Strike if N.A.)	S$ —	Name 3: —	