15/5/2010

INS. CASE OWNER: | CC 3 / CTI 1900 3766 / K1 ea3m2 | LKK: | IDAC:

ASSIGNMENT

Surveyor: AWK | DOI: 27/7/19 | Date / Time: 27/7/19

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. :	SMG 8762R	Claim No. :	SNH19B20100303C02/2 (Alu)
Name of Insured :	LOH SEET WAH, JEREMIAH	Policy No. :	
Insured Tel No. :	HP:	Make / Model :	
Excess Sec II :S$	D.O.A : 23/7/19	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**

SHD 1262M → ______ → ______ → ______

INSRS: WSP: Premium Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SHD 1262M - CU3/M18005302/ KY9352: 1004, 27/3/15
	SMG 8762R - X
	- FINALISED
25/6/19	Called OI to inform TP claim
	- TP LOD IN BY EMAIL
	- TP VIDEO IN. V/VIC SHD 1262M
04/07/19	- TYPE REPORT FOR MANDATE APPROVAL
	- REPORT DONE
05/08/19	- SEEK MANDATE APPROVAL TO OI
17/09/19	- CTI APPROVED MANDATE.
	- SEND ACCEPTANCE EMAIL TO TP
	- ALL DOCS IN.
	- TO CLOSE.

STAGE	DATE / PIC	
Non-Reporting ltr (1st):		
Non-Reporting ltr (2nd):		
Non-Reporting ltr (Final):		
Notification ltr (if non-pickup):		
Call OI:	25/06/19 - JWWY	
After call ltr to OI:	25/06/19 - JWWY	
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: 05/08/19 Sent By: QB

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: L/S	S$ 3,100.00 (4 days)	Reduction: 51 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 17/09/19	Confirm with SHAFAWATI	Email ✓ Call ☐
Final Liability:	% 100% (Agreed / Assessed)	BOLA S/N No. : 9a	If NO or B 28, Ass. Lia :
Repair Cost: (W/GST)	S$ 3,317.00		COI TURNING, TP VIDEO IN)
Loss of Rental (LOR):	S$ 602.34 (6 days) x $100.39		
Loss of Use (LOU):	S$ — ($ x 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: $400.00
Total:	S$ 3,926.79	**Global Sum S$:** —	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 3,926.79	Name 1:	PREMIER AUTOMOTIVE SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—