15/5/2010

INS. CASE OWNER: Stanley | CC 4 / ASM 1900 4003 / A ha3 | LKK: 601879 IDAC:

ASSIGNMENT

Surveyor: Lup DOI: 5/3/19 Date / Time: 4/3/2019

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : PC3981T Claim No. : SAM01F27

Name of Insured : CHAN BUS SERVICES Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 1/3/19 Place of Accident : Raffles Boulevard

Is driver the owner? (YES / NO) Nature 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**

SKX 8986X → → →

INSRS:
WSP: Custom Spray Painting.
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
1/3	SKX 8986X - CCU/AHA1 20 20611 / AP6392 ; DOA: 25/10/17
	PC3981T X
8/3	OPPR. sent out 1st letter.
	* To get LOA. To confirm vehicle usage.
29/4/19 @ 2.30pm - Khanchua	- Spoke to OID. He confirmed the mva and informed there were no passengers at the date and time of mva.
29/4/19 @ 2.50pm - Khanchua	- Spoke to OI (Mr. Chan - 97891196). Informed OI on TP claim and awaiting NCD will be affected if applicable. Requested for LOA. OI confirm m/bus only used as per purposes in p/schedules no passengers in m/bus at the time.
	* Pending : LOA.
	- ~~MANDATED.~~
	- TP LOD IN BY EMAIL
16/05/19	- UPLOADED MANDATE IA

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	29/4/19 - Khanchua
After call ltr to OI:	E-mail only

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: DS FORM	/	

PRELIMINARY ADVICE Date/Time: Sent By:

20/05/19 - MANDATE APPROVED. SAME AMOUNT AS LOD.

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: P/P S$ 8,652.63 (10 days) Reduction: 41 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 21/05/19 Confirm with FRANCIS Email / Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 8,652.63	COID REAR ENDED TP)
Loss of Rental (LOR):	S$ 1,800.00 (12 days) x $150.00	
Loss of Use (LOU):	S$ — ($ x days)	
Loss of Income (LOI):	S$ — ($ x days)	
LOR only / LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S$ —	
Medical:	S$ —	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ — (e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ —	3) Survey fee: $ 350.00
Total:	S$ 10,452.63 **Global Sum S$:** —	

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

Payee 1:	S$ 10,452.63	Name 1:	CUSTOM SPRAY PAINTING PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—