15/5/2010

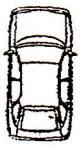
INS. CASE OWNER: BONNIE | CC 6/ MG 1900 K110 / A1a3 | LKK: IDAC:

ASSIGNMENT

Surveyor: LWP DOI: 20/3/19 Date / Time: 20/3/19

Registered in Merimen: 21/3/19

Pre-assign / CCU / FTE



Insured Vehicle No. : SFT 7052 C

Name of Insured : SHAMSUL B. SARJAN

Insured Tel No. : HP:

Excess Sec II :S$ D.O.A : 21/2/19

Is driver the owner? (YES / NO)

If **NO**, Driver Name / Age :

Driver Tel No. : (V/L: YES / NO)

Claim No. : 168493445556

Policy No. : 2100429955

Make / Model :

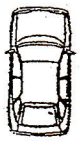
Place of Accident :

Nature of Accident :

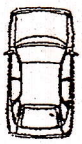
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % **Final ? Yes / No**

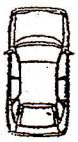
SLG6762R →



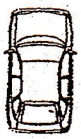
INSRS:
WSP: Success United
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
2/3	SLG6762R - X ; SFT 7052 C - X
Joy	- FINANCED - TP LOD IN BY EMAIL
05/07/19	- PICS REQUIRED. OI REPORTED BOTH VEHICLES CHANGED TOWARDS THE STATE LANE. HOWEVER, TP WAS AHEAD OF OI WHEN OI REAR-ENDED TP. SEND LETTER TO OI TO NOTIFY TP CLAIM & NCD ISSUES. - TP VIDEO FOOTAGE IN. - UPLOADED IN WORKING - SEND ACCEPTANCE EMAIL TO TP. - RECEIVED DOCS. - ALL 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:	05/07/19 - JC

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: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: L/S S$ 1,900.00 (5 days) Reduction: 72 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 05/07/19 Confirm with GIRINA Email / Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: (W/OUT)	S$ 2,055.00	COI CHANGED LANE TP VIDEO IN
Loss of Rental (LOR) (W/OUT)	S$ 642.00 (5 days) x $120.00	
Loss of Use (LOU):	S$ — ($ x days)	
Loss of Income (LOI):	S$ — ($ x days)	
LOR only / LOU only ☐	LOR + LOU ☐ LOR + LOI ☐ [Tick only one]	
GIA/LTA Search	S$ 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: $320.00
Total:	S$ 2,677.00 **Global Sum S$:** —	

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

Payee 1:	S$ 2,677.00	Name 1:	SUCCESS UNITED PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—