15/5/2010

INS. CASE OWNER: KIAN HENG | CC 3/AIG1900 7062 / A 7 #63 | LKK: IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 23/04/19 Date / Time: 22/4/19

Registered in Merimen: 22/4/19

Pre-assign / CCU / FTE

Insured Vehicle No. :	SMH 2517S		Claim No. :	1280527583G
Name of Insured :	MAGIC MARKETING P/L		Policy No. :	99444412
Insured Tel No. :		HP:	Make / Model :	HONDA
Excess Sec II :S$		D.O.A : 17/4/19	Place of Accident :	ESPLANADE DR

Is driver the owner? (YES / NO) Nature of Accident :

If **NO**, Driver Name / Age : WOK NADIA NATASHAH BTE MOHAMED WOK

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

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

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

SLW 4627 → ______ → ______ → ______

INSRS: WSP: premium. Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SLW4627 / SMH2517S GIA [illegible]
	- TO FINALISE COR
	HEAD-TO-REAR.
19/6/19	Called OI to inform TP claim
	- FINALISED.
	- ORIGINAL TP LOD IN
24/07/19	- SEND 1ST OFFER TO TP
05/08/19	- TP ACCEPTED OFFER. 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:	19/06/19 SHIRLEY - OL

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: P/P	S$ 3,129.20 (3 days)	Reduction: 47 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 05/08/19	Confirm with KELVIN	Email ☑ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27 -	If NO or B 28, Ass. Lia :
Repair Cost: (w/GST)	S$ 3,348.24		(COLD REAR-ENDED TP)
Loss of Rental (LOR):	S$ —	(days)	
Loss of Use (LOU):	S$ 200.00 (S$ 50 x 4 days)		
Loss of Income (LOI):	S$ — (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: $320.00
Total:	**S$** 3,555.69	**Global Sum S$:** —	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 3,355.69	Name 1: PREMIUM AUTOMOBILES PTE LTD	
Payee 2: (Strike if N.A.)	S$ 200.00	Name 2: SIM EE LIN	
Payee 3: (Strike if N.A.)	S$ —	Name 3: —	