15/5/2010

INS. CASE OWNER: | CC 6 /AIG1900 7416 / 4/83 | LKK: IDAC:

ASSIGNMENT

Surveyor: Marcus DOI: 20/4/19 Date / Time : 20/4/19. Registered in Merimen: 26/4/19.

Pre-assign / CCU / FTE

Insured Vehicle No. :	SMG 8393Y.	Claim No. :	231591381686
Name of Insured :	TEO KAI SI	Policy No. :	1900018950.
Insured Tel No. :	HP: 97,679077	Make / Model :	MAZDA
Excess Sec II :S$	D.O.A : 20/4/19.	Place of Accident :	SENGKANG W RD TURNING INTO YCK RD
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**

SLD 6651T →

INSRS: WSP: Tan Lim. Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SLD 6651T – X SMG 8393Y – X
13-5-19	@ 1106 AM W/ OI SHE WILL FORWARD THE VIDEO.
13-5-19	RECEIVED VIDEO FROM OI. BY EMAIL.
	VIDEO SHOWED - NO GREEN ARROW.
14/06/19	- SEND 1ST OFFER TO TP
	- TP ACCEPTED OFFER. ALL DOCS IN ORDER.

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	JOY 13-5-19
After call ltr to OI:	

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:		

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:
Repair Cost: LIS S$ 2,200.00 (3 days) Reduction: 50 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 14/06/19 Confirm with JOHNSON Email ✓ Call ☐

Final Liability:	% ~ 100 (Agreed / Assessed) BOLA S/N No. : 5	If NO or B 28, Ass. Lia : COI MAKING TURN)
Repair Cost: GST	S$ 2,354.00	
Loss of Rental (LOR):	S$ X (days)	
Loss of Use (LOU):	S$ 240.00 (S$60 x 4 days)	
Loss of Income (LOI):	S$ X (S$ x days)	
LOR only ☐ LOU only ✓ LOR + LOU ☐ LOR + LO ☐ **[Tick only one]**		
GIA/LTA Search	S$ 2.X X	
Medical:	S$ X	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ X (e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ X	3) Survey fee: $320.00
Total:	**S$** 2,596.00 **Global Sum S$:** —	

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

Payee 1:	S$ 2,596.00	Name 1:	TAN LIM MOTOR PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—