

15/5/2010

INS. CASE OWNER:

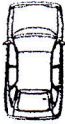
CC⁶ / CTI1900 8724, UH6352

LKK:

IDAC:

Surveyor: mmwmsDOI: ASSIGNMENT
16/07/19Date / Time: 16/07/19Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : SJP 7ally.Claim No. : 5NM19D7000940VName of Insured : LENTOR AMBULANCE P/LPolicy No. : DMCKSM80731871Insured Tel No. : — HP: —Make / Model : MASSAExcess Sec II : \$S — D.O.A : 8/07/19Place of Accident : PIC 7 WPS 7 ROME

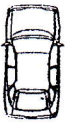
Is driver the owner? (YES / NO) Nature of Accident :

If NO, Driver Name / Age : MD KAMEO SHAM (NIN BAN

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

Driver Tel No. : — (V/L: YES / NO)

Insured Liability : % Final ? Yes / No

SLE 6/11/2INSRS:
WSP: Fastech
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	<u>SLE 4/11/2 - R</u>	Non-Reporting ltr (1st):	
	<u>SJP 7ally - R</u>	Non-Reporting ltr (2nd):	
	<u>MINAURED</u>	Non-Reporting ltr (Final):	
	<u>ORIGINAL TP LOD IN</u>	Notification ltr (if non-pickup):	
		Call OI:	
<u>28/08/19</u>	<u>PIC 8010000. OLD RATE- ENDED TP</u>	After call ltr to OI:	<u>28/08/19 - PIC</u>
	<u>SEND OFFER TO OI TO NOTIFY TP</u>	Documentation Check List: Handler	Typist
	<u>CLAIM 4 NCD ISSUED.</u>	Notification ltr (if non-pickup)	☐
		After call ltr to OI:	☒
<u>28/08/19</u>	<u>SEND PA TO OI</u>	Authorisation To Act:	☒
	<u>TYPE REPORT FOR MANDATE APPROVAL</u>	Release Voucher:	☒
	<u>REPORT DONE</u>	Final Repair Bill:	☒
<u>09/10/19</u>	<u>SEND MANDATE APPROVAL TO OI</u>	Car Rental Invoice:	☒
	<u>OI APPROVED MANDATE</u>	Towing Invoice	☐
	<u>SEND 1st OFFER TO TP</u>	LTA / GIA :	☐
	<u>TP ACCEPTED OFFER</u>	Medical Bill:	☐
<u>31/03/2020</u>	<u>ALL DOCS IN ORDER.</u>	PIR:	☐
	<u>TO CLOSE.</u>	Mandate/Reject Instruction:	☒
		LOD	☒
		Payment Breakdown Form:	☐
		Post-Repair Photos:	☐
		Others:	☐

PRELIMINARY ADVICE Date/Time: 28/08/19 Sent By: VIC

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: <u>49</u>	\$S <u>7,600.00</u> (<u>7</u> days) Reduction: <u>68</u> %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Final Liability: % <u>100</u> (Agreed / Assessed) BOLA S/N No. : <u>27</u>			
Repair Cost: (w/64%) \$S <u>8,132.00</u>			
Loss of Rental (LOR): \$S <u>600.00</u> (<u>6</u> days) x \$ <u>100</u>			
Loss of Use (LOU): \$S <u>—</u> (S x days)			
Loss of Income (LOI): \$S <u>—</u> (S x days)			
LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LO ☐ [Tick only one]			
GIA/LTA Search \$S <u>—</u>			
Medical: \$S <u>—</u>			
Disbursement: \$S <u>—</u> (e.g. Tow/ Independent)			
Legal Cost \$S <u>—</u>			
Total: \$S <u>8,732.00</u> Global Sum \$S: <u>—</u>			
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1: \$S <u>8,732.00</u> Name 1: <u>FASTECH AUTO PTE LTD</u>			
Payee 2: (Strike if N.A.) \$S <u>—</u> Name 2: <u>—</u>			
Payee 3: (Strike if N.A.) \$S <u>—</u> Name 3: <u>—</u>			