15/5/2010

INS. CASE OWNER: | CC 6 /CTI1900 87 np / Uh6352 | LKK: | IDAC:

ASSIGNMENT

Surveyor: marcus   DOI: 16/5/19.   Date / Time : 16/5/19.

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. :	SJP 7911Y.	Claim No. :	SNMI9D7209LOV
Name of Insured :	LENTOR AMBULANCE P/L	Policy No. :	DMCVSM8093V1811
Insured Tel No. :	HP:	Make / Model :	NISSAN.
Excess Sec II :S$	D.O.A : 8/5/19.	Place of Accident :	PIE TWDS THROMP

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

If **NO**, Driver Name / Age : MOHAMED SHAMSUDIN BIN DALIMAN.   OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. :   (V/L: YES / NO)   Insured Liability : %   **Final ? Yes / No**

SLE 6711Z → → →

INSRS: WSP: Fastech. Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SLE 6711Z — R SJP 7911Y — F
	- MANDATED
	- ORIGINAL TP LOD IN
28/08/19	- FILE REVIEWED. OID REAR-ENDED TP
	SEND LETTER TO OI TO NOTIFY TP
	CLAIM & NCD ISSUED.
28/08/19	- SEND PA TO OI
	- TYPE REPORT FOR MANDATE APPROVAL
	- REPORT DONE
09/10/19	- SEEK MANDATE APPROVAL TO OI
	- OI APPROVED MANDATE
	- SEND 1ST OFFER TO TP
	- TP ACCEPTED OFFER
31/03/2020	- 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:	28/08/19 - VIC	
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: 28/08/19   Sent By: VIC

FINALIZATION	Date/Time: Confirm with:	Confirm by:
Repair Cost: LIS	S$ 7,600.00 (7 days) Reduction: 68 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 23/03/2020 Confirm with JASON	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia : (OID REAR-ENDED TP)
Repair Cost: (w/GST)	S$ 8,132.00	
Loss of Rental (LOR):	S$ 600.00 (6 days) x $100	
Loss of Use (LOU):	S$ — (S x days)	
Loss of Income (LOI):	S$ — (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: $400.00
Total:	S$ 8,732.00 **Global Sum S$:** —	
FINAL PAYMENT	Date/Time: Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 8,732.00	Name 1: FASTECH AUTO PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2: —
Payee 3: (Strike if N.A.)	S$ —	Name 3: —