15/5/2010

INS. CASE OWNER: CC3 / AIG 15013928 / Kha 3-1 | LKK: | IDAC:

ASSIGNMENT

Surveyor: Kenneth DOI: 17/08/2015 Date / Time : Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : SJP 9847 L Claim No. : 29082905645G

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 30/07/2015 Place of Accident :

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

SHD 520A → → →

INSRS:	INSRS:	INSRS:	INSRS:
WSP: Trans-cab	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time	
	SHD 520A - CC3/AIG 11019998/Kn1q2q2 DOA 28/09/2011
	SJP 9847L - CC3/AIG 18008427/Sl6t3q2 DOA 05/05/2018
	- RE-OPEN CASE
	- TP VIDEO IN. UPLOADED IN WEBPAGE
	- THIS REVIEWED. BASED ON TP VIDEO, BOTH SIDE SWIPED EACH OTHER @ THE JUNCTION. LETTER CANT SENT OUT TO OI BEFORE.
	- TP LOD IN BY EMAIL
06/09/19	- SEND 1ST OFFER TO TP
	- TP REJECTED OFFER
24/09/19	- 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:	18/09/19 - SVN

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:		

RELIMINARY ADVICE Date/Time: Sent By:

INALIZATION	Date/Time:	Confirm with:	Confirm by:
epair Cost: P/P	S$ 625.00 (1.5 days) Reduction: 90 %		Email Call
NAL SETTLEMENT	Date/Time: 24/09/19 Confirm with WAI YIN		Email ✓ Call
nal Liability:	% 50 (Agreed / Assessed) BOLA S/N No. : NIL		If NO or B 28, Ass. Lia :
pair Cost: (w/GST) $668.75	S$ 334.38		SIDE SWIPED
ss of Rental (LOR) $86.10	S$ 93.09 (2 days) X $93.09		
ss of Use (LOU): —	S$ — ($ x days)		REOPEN CASE
ss of Income (LOI) $100	S$ 50.00 ($ 50 x 2 days)		
OR only LOU only	LOR + LOU LOR + LOI ✓ [Tick only one]		
A/LTA Search $ 6.00	S$ 6.00		
edical: —	S$ —		
sbursement: —	S$ — (e.g. Tow/ Independent)		1) Claim status: Normal/Reject/Private Settle
gal Cost —	S$ —		2) Report Format:
tal: $960.93	S$ 483.47 Global Sum S$: 480.00		3) Survey fee: $320.00 (PAID)

NAL PAYMENT	Date/Time:	Confirm with:	Email Call
yee 1:	S$ 480.00	Name 1:	TRANS-CAB AUTO SERVICES PTE LTD
yee 2: (Strike if N.A.)	S$ —	Name 2:	—
yee 3: (Strike if N.A.)	S$	Name 3:	—