

15/5/2010

INS. CASE OWNER:

LEE HING YAO

CC

6/AIG1901 0744, A h63

LKK:

IDAC:

Surveyor:

Adrian

DOI:

ASSIGNMENT

18/6/14

Date / Time:

18/6/14

Registered in Merimen:

18/6/14

Pre-assign / CCU / FTE



Insured Vehicle No.:

GBH 9680L

Claim No.:

451197011156

Name of Insured:

DAMIER FLEET MANAGEMENT (P) LTD

Policy No.:

9AAAAA5580

Insured Tel No.:

HP:

Make / Model:

VOLKSWAGEN

Excess Sec II :\$S

D.O.A.:

14/6/14

Place of Accident:

3 LANE RD

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age: MERVIN SIMYI

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

Driver Tel No.:

(V/L: YES / NO)

Insured Liability: %

Final ? Yes / No

5611 75430

→ GBH 9680L →

562 6729M →



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

01



INSRS:

WSP:

Tel:

Liability:

RMKS:

LEE SHONG



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time		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:	26/06/14 - SIMYI - OK
		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:
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FINALIZATION	Date/Time:	Confirm with:	Confirm by:
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Repair Cost:	L/S	\$S 4,150.00	(6 days) Reduction: 5A %	Email ☐ Call ☐
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FINAL SETTLEMENT	Date/Time:	Confirm with:	Email ☒ Call ☐
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Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No.:	28-	If NO or B 28, Ass. Lia: 0% -
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Repair Cost: (w/less)	\$S 4,440.50	(3 Veh CC, 2nd Veh) -
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Loss of Rental (LOR) (w/less)	\$S 856.00	(8 days) x \$100.00
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Loss of Use (LOU):	\$S -	(\$ x days)
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Loss of Income (LOI):	\$S -	(\$ x days)
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LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LO ☐ [Tick only one]

GIA/LTA Search	\$S 7.45
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Medical:	\$S -
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Disbursement:	\$S -	(e.g. Tow/ Independent)
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Legal Cost	\$S -
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Total:	\$S 5,303.95	Global Sum \$S: -
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FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
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Payee 1:	\$S 5,303.95	Name 1: LEE SHONG AUTO PTE LTD
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Payee 2: (Strike if N.A.)	\$S -	Name 2: -
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Payee 3: (Strike if N.A.)	\$S -	Name 3: -
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