15/5/2010

INS. CASE OWNER: SALHA | CC **4**/AIG1901 1609, 62663 | LKK:
IDAC:

Surveyor: Kalvin **DOI:** V6/6/19 **Date / Time:** V6/6/19
ASSIGNMENT | Registered in Merimen: 24/6/19.

Pre-assign / CCU / FTE

Insured Vehicle No.	:	SJT 5776E	Claim No.	:	AI6207307366
Name of Insured	:	TAN SENG CHONG	Policy No.	:	40016852
Insured Tel No.	:	HP:	Make / Model	:	MERCEDES.
Excess Sec II :S$		D.O.A : 25/6/19.	Place of Accident	:	NEWTON CIRCUS.

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**

SHA 1881S →
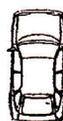
INSRS: WSP: COGE	INSRS: WSP:	INSRS: WSP:	INSRS: WSP:	INSRS: WSP:
Tel : 45.	Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time			STAGE	DATE / PIC
	SHA 1881S — X	SJT 5776E — X	Non-Reporting ltr (1st):	
			Non-Reporting ltr (2nd):	
01/07/19	FILE REVIEWED. OI ENTERED ROUND ABOUT. SEND LETTER TO OI TO NOTIFY TP CLAIM & NCD ISSUES.		Non-Reporting ltr (Final):	
			Notification ltr (if non-pickup):	
			Call OI:	
			After call ltr to OI:	01/07/19 - JIMMY
	FINALIZED		**Documentation Check List:** Handler Typist	
			Notification ltr (if non-pickup):	
1/7/19	Lttr sent to OI		After call ltr to OI:	✓
			Authorisation To Act:	✓
	ORIGINAL TP LOD IN		Release Voucher:	✓
			Final Repair Bill:	✓
09/07/19	SEND 1st OFFER TO TP		Car Rental Invoice:	✓
	TP ACCEPTED OFFER.		Towing Invoice:	
	ALL DOCS IN ORDER.		LTA / GIA :	✓
	TO CLOSE.		Medical Bill:	
			PIR:	
			Mandate/Reject Instruction:	
			LOD	✓
			Payment Breakdown Form:	

PRELIMINARY ADVICE Date/Time: Sent By: | Post-Repair Photos: | |
| | Others: | |

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: T/P	S$ 3,723.33 (3 days) Reduction: 5% %		Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 09/07/19 Confirm with: KARGAU Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 12	If NO or B 28, Ass. Lia :
Repair Cost: (W/GST)	S$ 3,982.96	(OI ENTERED T/A)
Loss of Rental (LOR):	S$ 313.50 (25 days) X $125.40	
Loss of Use (LOU):	S$ 125.00 ($50 x 2.5 days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LO ✓ [Tick only one]		
GIA/LTA Search	S$ 7.49	
Medical:	S$ —	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ — (e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ —	3) Survey fee: $320.00
Total:	S$ 4,429.95 Global Sum S$: 4,420.00	

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

Payee 1:	S$ 4,420.00	Name 1:	COMFORTDELGRO ENGINEERING PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—