15/5/2010

INS. CASE OWNER: CC 4/EGI1901 1700, KHB3 | LKK: | IDAC:

ASSIGNMENT

Surveyor: KENNETH DOI: 03/07/19 Date / Time : 11/7/19.

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : XD 2351T Claim No. : CDMCG 1900122 1/PXLIC

Name of Insured : ENG LIM CONTRACTORS CO PTE Policy No. : DMCG1900 4906.

Insured Tel No. : HP: Make / Model : ISUZU.

Excess Sec II :S$ D.O.A : 4/6/19 Place of Accident : PAYA LEBAR EXIT TO PIE

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

If **NO**, Driver Name / Age : RAMASAMY SRINIVASAN. OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

SJY 7471D →

INSRS: LIM TAN.	INSRS:	INSRS:	INSRS:
WSP:	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time	
	SJY 7471D – X XD 2351T – X
12/07/19	– M/C REQUIRED. MERGING LANE. SEND LETTER TO OI TO NOTIFY TP CLAIM & NCD ISSUES.
	– EMAIL LIABILITY UNCLEAR
	– ERGO CLEARED LIABILITY
	– TP LOD IN BY EMAIL
	– TYPE REPORT FOR MANDATE APPROVAL
	– REPORT DONE
08/08/19	– SEEK MANDATE APPROVAL TO ERGO
	– TP CLAIM LOU.
16/08/19	– ERGO APPROVED MANDATE.
	– SEND ACCEPTANCE TO TP.
	– NO DV REQUIRED.
	– ALL DOCS IN ORDER.

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:	12/07/19 - VIC

Documentation Check List:	Handler	Typist
Notification ltr (if non-pickup)		
After call ltr to OI:	✓	
Authorisation To Act:	✓	
Release Voucher: NO DV		
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: 04/07/19 Sent By: L23

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: LG S$ 1,300.00 (3 days) Reduction: 26 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 16/08/19 Confirm with RICHARD Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: (W/69T)	S$ 1,391.00	CHERGING LANE? ERGO CLEARED LIABILITY
Loss of Rental (LOR):	S$ — (days)	
Loss of Use (LOU):	S$ 270.00 ($90 x 3 days)	
Loss of Income (LOI):	S$ — ($ x days)	
LOR only ☐ LOU only ✓ LOR + LOU ☐ LOR + LO ☐ **[Tick only one]**		
GIA/LTA Search	S$ 7.45	
Medical:	S$ —	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ — (e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$	3) Survey fee: $400.00
Total:	S$ 1,668.45 **Global Sum S$:** —	

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

Payee 1:	S$ 1,668.45	Name 1:	LIM TAN MOTOR PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—