15/5/2010

INS. CASE OWNER: LOH CHEE HENG | CC3/AIG19014783/Kha3 | LKK: IDAC:

ASSIGNMENT

Surveyor: KENNETH DOI: 20/08/2019 Date / Time: 20/08/2019

Registered in Merimen: 22/08/2019

Pre-assign / CCU / FTE

Insured Vehicle No. : SLH8394B Claim No. : 75474 115615G

Name of Insured : CHUA THIAM SOON Policy No. : 1900014525

Insured Tel No. : HP: +65-96224288 Make / Model : HONDA CRV

Excess Sec II :S$ D.O.A : 18/08/2019 21:55 Place of Accident : PIE TWDS AIRPORT BEFORE THOMSON

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

If **NO**, Driver Name / Age : CHUA MING YANG MALCOLM OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : +65-90263722 (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SHD 9920U → → →

INSRS:	INSRS:	INSRS:	INSRS:
WSP: TRANS-CAB	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time		
	SLH 8394B - CC4/ASM19014598/Awa3 ; DOA: 18/8/19	**STAGE** **DATE / PIC**
	SHD 9920U - CC3/III18006488/Keb3q2; DOA:4/4/18	Non-Reporting ltr (1st):
	- CS/FCI17023644/Ktd3n2; DOA:10/12/17	Non-Reporting ltr (2nd):
	- CC3/AXA16002631/Kza3s2; DOA:6/2/16	Non-Reporting ltr (Final):
		Notification ltr (if non-pickup):
	* CLAIMING EACH OTHERS	Call OI:
		After call ltr to OI: 26/08/19 - VIC
26/08/19	- PME REQUIRED. OLD INVOLVED IN A 3 VEH. C.C. & WAS THE 2ND CAR.	**Documentation Check List: Handler Typist**
	SEND LETTER & EMAIL TO OI TO NOTIFY TP CLAIM & NCD LOSS.	Notification ltr (if non-pickup)
	- FINALISED.	After call ltr to OI: ☑
	- ORIGINAL TP LOD IN	Authorisation To Act: ☑
16/09/19	- UPLOAD MANDATE IA IN WORKMEN	Release Voucher: ☑
18/09/19	- AIG APPROVED MANDATE	Final Repair Bill: ☑
	- SEND ACCEPTANCE EMAIL TO TP	Car Rental Invoice: ☑
	- DV IN. ALL DOCS IN ORDER	Towing Invoice
	- TO CLOSE.	LTA / GIA : ☑
		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: LIO	S$ 1,850.00 (2 days) Reduction: 94 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 20/09/19	Confirm with WAH YIN	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0%
Repair Cost: (W/GST)	S$ 1,979.50		C3 VEH. C.C.; OID 2ND)
Loss of Rental (LOR):	S$ 380.16 (4 days)	X $95.04	
Loss of Use (LOU):	S$ — ($ x days)		
Loss of Income (LOI):	S$ 200.00 ($50 x 4 days)		
LOR only ☐ LOU only ☐	LOR + LOU ☐ LOR + LOI ☑	[Tick only one]	
GIA/LTA Search	S$ 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: $320.00
Total:	S$ 2,567.15	**Global Sum S$:** —	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 2,567.15	Name 1:	TRANS-CAB AUTO SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—