15/5/2010

INS. CASE OWNER: CC 6/EQI1901 6132, Ugbb52

LKK:
IDAC:

ASSIGNMENT

Surveyor: Marcus DOI: 17/9/19. Date / Time : 11/9/19.

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : XD 9855K

Name of Insured : AJ HORTICULTURAL SERVICES PTE

Insured Tel No. : HP:

Excess Sec II :S$ D.O.A : 10/9/19.

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

If **NO**, Driver Name / Age : SELVAKUMAR RAJAVEL

Driver Tel No. : (V/L: YES / NO)

Claim No. : DMI19/10/1132-TG

Policy No. : DMPI19/08-007133.

Make / Model : ISUZU.

Place of Accident : PIONEER SECTOR 2

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

Insured Liability : % **Final ? Yes / No**

SKH 5177D. → → →

INSRS: Hup motor
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SKH5177D - X XD9855K - X
10/9 -	waiting clear send TP to Vivian → David.
17/10 -	Email LOI.
-	Settle @ $2102 as per TP LOD. File pacs Admin to close.

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	Y CPL 17/10/19
After call ltr to OI:	

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	X	
LTA / GIA :	/	
Medical Bill:	X	
PIR:	X	
Mandate/Reject Instruction:	X	
LOD	/	
Payment Breakdown Form:		
Post-Repair Photos:	X	
Others:	X	

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by: Marcus. Email ☐ Call ☐

Repair Cost: L/S S$ 1700.00 (4 days) Reduction: $1756.22 % 51

FINAL SETTLEMENT Date/Time: 17/10/19. Confirm with David. Email / Call ☐

Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 22
Repair Cost:	S$ 1700.00	
Loss of Rental (LOR):	S$ 400.00	(4 days) x $100
Loss of Use (LOU):	S$ –	($ x days)
Loss of Income (LOI):	S$ –	($ x days)
LOR only / LOU only ☐	LOR + LOU ☐	LOR + LO ☐ [Tick only one]
GIA/LTA Search	S$ 2.00	
Medical:	S$ –	
Disbursement:	S$ –	(e.g. Tow/ Independent)
Legal Cost	S$ –	
Total:	S$ 2102.00	**Global Sum S$:** –

If NO or B 28, Ass. Lia : 01 reverse hit any.

COPY SENT 18/10/19

1) Claim status: Normal/Reject/Private Settle

2) Report Format: TP

3) Survey fee: $400/-

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

Payee 1:	S$ 2102.00	Name 1:	Hup motor Trading & Service.
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	