15/5/2010

INS. CASE OWNER: LOH CHEE HENG | CC 4/AIG1901 6585 / KH63 | LKK:
IDAC:

ASSIGNMENT

Surveyor: KENNETH DOI: 24/09/19 Date / Time: 1a/a/a.
Registered in Merimen: 1a/a/a.

Pre-assign / CCU / FTE

Insured Vehicle No. : SDZ 8008S. Claim No. : NP8649674056
Name of Insured : HO PENG WEONG. Policy No. : 1900111688
Insured Tel No. : HP: Make / Model : BMW
Excess Sec II :S$ D.O.A : 17/9/19. Place of Accident : BET CARDIFF GROVE RD & BUSSTOP 66131
Is driver the owner? (YES / NO) Nature of Accident :
If NO, Driver Name / Age : HO WEI LEE STUART. OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO
Driver Tel No. : (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SJV 8329R → ______ → ______ → ______

INSRS:
WSP:
Tel : Alan's united
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SJV8329R x SDZ8008S - t
23/09/19	- FILE REVIEWED. OI REAR-ENDED TP. SEND LETTER & EMAIL TO OI TO NOTIFY TP CLAIM & NCD ISSUES.
	- EMAIL LIABILITY CLEAR
	- FINALISED
	- OI REVERTED, AGREED TO CLOSE.
	- ORIGINAL TP LOD IN
21/10/19	- UPLOADED IA IN MERIMEN
22/10/19	- AG APPROVED MANDATE
	- SEND ACCEPTANCE EMAIL TO TP
	- ALL DOCS IN ORDER
	- TO CLOSE.

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:	23/09/19 - UIC

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:

FINALIZATION Date/Time: Confirm with: Confirm by:
Repair Cost: L/S S$ 2,050.00 (3 days) Reduction: 24 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 23/10/19 Confirm with KENNY Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia : (OI REAR-ENDED TP)
Repair Cost: (W/GST)	S$ 2,193.50	
Loss of Rental (LOR):	S$ 400.00 (4 days) x $100.00	
Loss of Use (LOU):	S$ — ($ x days)	
Loss of Income (LOI):	S$ — ($ x days)	
LOR only ✓ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S$ 2.00	1) Claim status: Normal/Reject/Private Settle
Medical:	S$ —	2) Report Format:
Disbursement:	S$ — (e.g. Tow/ Independent)	3) Survey fee: $320.00
Legal Cost	S$ —	
Total:	S$ 2,595.50 **Global Sum S$:** —	

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

Payee 1:	S$ 2,595.50	Name 1: ALAN'S UNITED AUTO PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2: —
Payee 3: (Strike if N.A.)	S$ —	Name 3: —