15/5/2010

INS. CASE OWNER: CC3/CTI19016751/K1ha3n2

LKK:

IDAC:

ASSIGNMENT

Surveyor: KALVIN DOI: 20/09/19 Date / Time : 20/09/19

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : GBH 9918C Claim No. : SNM19D2044440218 (chugpw)

Name of Insured : M/S AL-REHMAT TRADING PTE LTD Policy No. : DMCVSN1837901800

Insured Tel No. : HP: Make / Model : NISSAN NV350 PANEL VAN 2.5 5MT 5DR

Excess Sec II :S$ D.O.A : 18/09/2019 19:30 Place of Accident : ARAB ST

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

If **NO**, Driver Name / Age : ABDOLRAZAGH VOJODI GHAHVEHCHI OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : +65-86248633 (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SHC 5452K → → →

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

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SHC 5452K - CC3/AIG13008362/Kk1t2w2; DOA:6/5/13
	GBH 9918C NA/CTI19016595/z4 ; DOA: 18/09/19
	- UNAUTHED
14/10/19	- FILE REQUISITIONED. OIC REPORTED HE REQUIRED TO PACK WHEN HIT BY PASSING TP. SEND LETTER TO OI TO NOTIFY TP CLAIM 4 NCD ISSUES.
17/10/19	- TYPE REPORT WHILE PENDING TP LOD - REPORT DONE - ORIGINAL TP LOD IN
25/02/2020	- SEEK MANDATE APPROVAL TO OI - TP TO ALLOWED TPX INVOICE 4 LOD. - OI APPROVED MANDATE
28/02/2020	- SEND 1ST OFFER TO TP
02/03/2020	- TP ACCEPTED OFFER. - 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:	14/10/19 - VIC

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: 24/09/19 Sent By: 93

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: L16 S$ 4,400.00 (4 days) Reduction: 88 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 02/03/20 Confirm with WAI YIN Email ☑ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 24 If NO or B 28, Ass. Lia :

Repair Cost: (W/GST) S$ 4,708.00 (OIC REQUISITIONED TO PACK)

Loss of Rental (LOR): S$ 581.94 (6 days) X $96.99

Loss of Use (LOU): S$ — ($ x days)

Loss of Income (LOI): S$ 300.00 ($50 x 6 days)

LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☑ **[Tick only one]**

GIA/LTA Search S$ 7.49

Medical: S$ —

Disbursement: S$ — (e.g. Tow/ Independent)

Legal Cost S$ —

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee: $400.00

Total: S$ 5,597.43 **Global Sum S$:** —

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

Payee 1:	S$ 5,597.43	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:	—