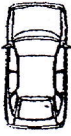
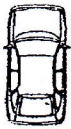
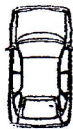
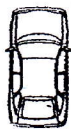


ASSIGNMENT

Surveyor: KALVINDOI: 20/09/19Date / Time: 20/09/19Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : GBH 9918CClaim No. : SNM19D20A4440218 (chugpu)Name of Insured : M/S AL-REHMAT TRADING PTE LTDPolicy No. : DMCVSN1837901800Insured Tel No. : HP: Make / Model : NISSAN NV350 PANEL VAN 2.5 5MT 5DRExcess Sec II : \$ D.O.A : 18/09/2019 19:30Place of Accident : ARAB STIs driver the owner? (YES / NO) Nature of Accident : If NO, Driver Name / Age : ABDOLRAZAGH VOJODI GHAAHVEHCHI OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NODriver Tel No. : +65-86248633 (V/L: YES / NO)Insured Liability : % Final ? Yes / NoSHC 5452KINSRS:
WSP: TRANS-CAB
Tel :
Liability :
RMKS: INSRS:
WSP:
Tel :
Liability :
RMKS: INSRS:
WSP:
Tel :
Liability :
RMKS: INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SHC 5452K - CC3/AIG13008362/Kk1t2w2; DOA:6/5/13	Non-Reporting ltr (1st):	
	GBH 9918C NA/CTI19016595/z4; DOA: 18/09/19	Non-Reporting ltr (2nd):	
	MANAGED	Non-Reporting ltr (Final):	
14/10/19	FIVE REQUIRED. OLD REPORTED THE	Notification ltr (if non-pickup):	
	REPORTED TO PHEN WHEN HIT BY	Call OI:	
	PICKING TP. SEND LETTER TO OI TO	After call ltr to OI: <u>14/10/19 - VIC</u>	
	NOTIFY TP CLAIM & NEW ISSUES.	Documentation Check List: Handler Typist	
14/10/19	TYPE REPORT WHILE PENDING TP LOD	Notification ltr (if non-pickup)	☐
	REPORT DONE	After call ltr to OI:	☒
	ORIGINAL TP LOD IN	Authorisation To Act:	☒
		Release Voucher:	☒
29/02/2020	STAK MANDATE APPROVAL TO OI	Final Repair Bill:	☒
	TP TO AVOID TAX INVOICE & LOD.	Car Rental Invoice:	☒
	OTI APPROVED MANDATE	Towing Invoice	☐
28/02/2020	SEND SET OFFER TO TP	LTA / GIA :	☒
02/03/2020	TP ACCEPTED OFFER.	Medical Bill:	☐
	ALL DOCS IN ORDER.	PIR:	☐
	TO CLOSE	Mandate/Reject Instruction:	☐
		LOD	☒
		Payment Breakdown Form:	☐
PRELIMINARY ADVICE	Date/Time: <u>24/09/19</u> Sent By: <u>QB</u>	Post-Repair Photos:	☐
		Others:	☐

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: <u>US</u>	\$S <u>4,100.00</u> (<u>4</u> days) Reduction: <u>88</u> %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: <u>02/03/20</u> Confirm with: <u>WAI YIN</u>		Email ☒ Call ☐
Final Liability:	% <u>100</u> (Agreed / Assessed) BOLA S/N No. : <u>2A</u>		If NO or B 28, Ass. Lia : <u>(OLD REPORTED TO PHEN)</u>
Repair Cost: <u>(w/gst)</u>	\$S <u>4,708.00</u>		
Loss of Rental (LOR):	\$S <u>581.94</u> (<u>6</u> days) <u>X \$96.99</u>		
Loss of Use (LOU):	\$S <u>-</u> (\$ <u>x</u> days)		
Loss of Income (LOI):	\$S <u>300.00</u> (\$ <u>50</u> x <u>6</u> days)		
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☒ [Tick only one]			
GIA/LTA Search	\$S <u>7.49</u>		
Medical:	\$S <u>-</u>		1) Claim status: <u>Normal/Reject/Private Settle</u>
Disbursement:	\$S <u>-</u> (e.g. Tow/ Independent)		2) Report Format:
Legal Cost	\$S <u>-</u>		3) Survey fee: <u>\$400.00</u>
Total:	\$S <u>5,597.43</u> Global Sum \$S: <u>-</u>		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	\$S <u>5,597.43</u>	Name 1: <u>TRANS-CAB AUTO SERVICES PTE LTD</u>	
Payee 2: (Strike if N.A.)	\$S <u>-</u>	Name 2: <u>-</u>	
Payee 3: (Strike if N.A.)	\$S <u>-</u>	Name 3: <u>-</u>	