15/5/2010

INS. CASE OWNER: CC4/LPC19017803/Eha3

LKK:
IDAC:

ASSIGNMENT

Surveyor: STEVE DOI: 10/10/2019 Date / Time : 09/10/2019

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : YN 9515C Claim No. : 19/19/19/VC05/022485

Name of Insured : Fast Frozen Food Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 07/10/2019 15:30 Place of Accident : PIE TWDS TUAS

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

If **NO**, Driver Name / Age : OI GIA REPORT: (YES) / NO ; TP GIA REPORT: (YES) / NO

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

PC 4710C → → →

INSRS:
WSP: CONNECT 3
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	PC 4710C - X YN 9515C - X
	- FINALISED
30/10/19	- FILE REVIEWED. OLD CHANGED LANE.
	- TIME REPORT WHILE PENDING TP LOD
	- TP LOD IN BY EMAIL
	- REPORT DONE
02/12/19	- 998K MANDATE APPROVAL TO LPC
04/12/19	- LPC APPROVED MANDATE
	- SEND ACCEPTANCE EMAIL TO TP.
11/02/2020	- ORIG. DV IN. 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:	

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: 08/10/19 Sent By: 03

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: L/S	S$ 6,200.60 (6 days) Reduction: 53 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 07/02/2020 confirm with WINNIE		Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 15		If NO or B 28, Ass. Lia :
Repair Cost: (W/GST)	S$ 6,634.00		COLD CHANGED LANE
Loss of Rental (LOR):	S$ — (days)		
Loss of Use (LOU):	S$ 900.00 ($150 x 6 days)		
Loss of Income (LOI):	S$ — ($ x days)		
LOR only ☐ LOU only	☑ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S$ —		
Medical:	S$ —		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ — (e.g. Tow/ Independent)		2) Report Format:
Legal Cost	S$ —		3) Survey fee: $400.00
Total:	S$ 7,534.00 **Global Sum S$:** —		

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 7,534.00	Name 1:	CONNECT3
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—