~~Maria~~ Irene Tay CC3/CTI18004490/K1pa3q2-1

INS. CASE OWNER: ~~Jaeyn~~ ~~CC3, CTI18004490, K1pa3q2~~ LKK: IDAC:

Re-opened Case

ASSIGNMENT

Surveyor: Ang DO: 7/3/18 Date / Time: 7/3/18

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No.	CB 7325 X	Claim No.	SNMI18 01278 C02
Name of Insured	Yao Sio Hua	Policy No.	DMB1SN17 594?700
Insured Tel No.	HP:	Make / Model	NISSAN URVAN
Excess Sec II :S$	D.O.A: 6/3/18 ✓	Place of Accident:	Adam Rd → PIE
Is driver the owner?	(YES / NO)	Nature of Accident:	
If NO, Driver Name / Age:	Zakba Bin Bakar	OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO	
Driver Tel No.:	90414427 (V/L: YES / NO)	Insured Liability: %	Final ? Yes / No

SHA 4073M → → →

INSRS: WSP: CVGG loyang Tel: Liability: RMKS:	INSRS: WSP: Tel: Liability: RMKS:	INSRS: WSP: Tel: Liability: RMKS:	INSRS: WSP: Tel: Liability: RMKS:

Date/ Time	
16/3 0A?	SHA 4073M - CL?/417003014/Ne1? : ... ; CB7325X - ...
	OI involved in 7 accidents within 10 minutes
	* To get video from TP.
29/3/18 @ 11.?am	Called OI, Ms Yeo. Confirm accident. OI confirm DOA on 6/3/18. OID is no longer working with her. Inform TP claim. Agree to settle & aware NCD issue. * To send addendum to OI.
29/7/18	– Rec'd OI addendum
16/4/18	– File pass to type mandate.
30/07/2020	Pls refer to VIEWS for details.
13-05-19	INCREASE OFFER TO TP.

RECEIVED 18 APR 2018

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	29/3/18
After call ltr to OI:	03/4/2018

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: 7/3 Sent By: Ang

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: P/P	S$ 4,166.48 (3 days)	Reduction: 33 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time 30/07/2020	Confirm with Catherine	Email ✓ Call ☐
Final Liability:	% 50 ~~full~~	(Agreed / Assessed) BOLA S/N No.: ~~2~~ NIL	If NO or B 28, Ass. Lia: TP escalated GIA
Repair Cost: 4,458.13	S$ 2,229.07		
Loss of Rental (LOR): 357.84	S$ 178.92 (3 days) x $119.28		
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI): 150.00	S$ 75.00 ($ 50 x 3 days)		
LOR only ☐ LOU only ☐	LOR + LOU ☐	LOR + LOI ✓ [Tick only one]	27/8 ??
GIA/LTA Search:	S$ 7.49		
Medical:	S$		1) Claim status: Normal/Reject/Private Settle (Up)
Disbursement:	S$	(e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$		3) Survey fee: $350
Total:	S$ 2,490.48	Global Sum S$: 3,000.00 (abt 60%)	($400.00-$350.00 = $50.00)
FINAL PAYMENT	Date/Time:	Confirm with:	Email ✓ Call ☐
Payee 1:	S$ 3,000.00	Name 1: ComfortDelGro Engineering Pte Ltd	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	

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