

15/5/2010

INS. CASE OWNER:

CC 3/AXA170

16220, KUN

s3

LKK:

IDAC:

Surveyor:

Kinneta

DOI:

ASSIGNMENT

n18/12

p

Date / Time:

n18/12

Registered in Merimen:

Pre-assign / CCU / FTE

En 8990



Insured Vehicle No.:

Name of Insured:

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A.:

Is driver the owner?

(YES / NO)

Nature of Accident:

Claim No.:

Policy No.:

Make / Model:

Place of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SH0166P



INSRS:

WSP:

Tel:

Liability:

RMKS:

Trans
cab

INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time	STAGE	DATE / PIC
24/04/2020	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:	Sent By:
FINALIZATION		Date/Time:	Confirm with:
Repair Cost: P/P	\$S 5,865.83	(5 days)	Reduction: 85 %
FINAL SETTLEMENT		Date/Time:	Confirm with:
Final Liability:	% 50	(Agreed / Assessed) BOLA S/N No. : NIL	
Repair Cost: 6,276.44	\$S 3,138.22		
Loss of Rental (LOR) 422.96	\$S 211.48	(4 days) x \$105.74	
Loss of Use (LOU):	\$S (\$ x days)		
Loss of Income (LOI): 200	\$S 100.00	(\$50.00 x 4 days)	
LOR only ☐ LOU only ☐	LOR + LOU ☐ LOR + LOI ☒	(Tick only one)	
GIA/LTA Search	\$S 5.35		
Medical:	\$S		
Disbursement:	\$S	(e.g. Tow/ Independent)	
Legal Cost	\$S		
Total:	\$S 3,455.05	Global Sum \$S: 3,400.00	
LEGAL PAYMENT		Date/Time:	Confirm with:
Payee 1:	\$S 3,400.00	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:	

w/GS