

INS. CASE OWNER:

BENNY

CC 6 / AIG1800

OS-77, 4/23

1. KKK.

IDAC:

Surveyor:

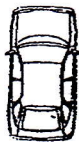
DOI:

ASSIGNMENT

Date / Time :

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.

Name of Insured

Insured Tel No.

Excess Sec II :S\$

Is driver the owner?

(YES / NO)

Nature of Accident :

If **NO**, Driver Name / Age :

Driver Tel No. :

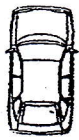
(V/L: YES / NO)

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

Insured Liability :

%	Final ?	Yes / No
100	100	100
90	90	90
80	80	80
70	70	70
60	60	60
50	50	50
40	40	40
30	30	30
20	20	20
10	10	10
0	0	0

PCSS 718



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP

Tel :

Liability :

RMKS:



INSRS.

WSP

Tel :

Liability :

RMKS:

Bumper cannot be reprinted
aluminum to be replaced

Band on accelerator photo
- Bent
- pushed
1 in.
misaligned

Date/ Time	STAGE
21/1/18	Non-Repo
21/1/18	Non-Repo
26.01.2018:	Non-Reporting ltr (Final):
26.01.2018	Notification ltr (if non-pickup):
08022018:	Call OI:
21/08/19	After call ltr to OI: 21/08/19-vic
08/10/19	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: Confirm by:
Repair Cost: P/P	S\$ 1,709.12 (3 days) Reduction: 73 % Email Call
FINAL SETTLEMENT	Date/Time: 08/10/19 Confirm with: SKON Email Call
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27
Repair Cost: (w/loss)	S\$ 1,828.76
Loss of Rental (LOR):	S\$ (days)
Loss of Use (LOU):	S\$ 180.00 (\$180 x 3 days)
Loss of Income (LOI):	S\$ (\$ x days)
LOR only LOR + LOU LOR + LOI	[Tick only one]
GIA/LTA Search	S\$ 2.00
Medical:	S\$
Disbursement:	S\$ (e.g. Tow/ Independent)
Legal Cost	S\$
Total:	S\$ 2,280.76 Global Sum S\$: 2,280.00
FINAL PAYMENT	Date/Time: Confirm with: Email Call
Payee 1:	S\$ 2,280.00 Name 1: KIM CHUNGE AUTO PTG LTD
Payee 2: (Strike if N.A.)	S\$ Name 2:
Payee 3: (Strike if N.A.)	S\$ Name 3: