

15/5/2010

INS. CASE OWNER:

Cyntia

CC 4<sup>ASM</sup> / AXA1800

4640, Uhb3

LKK:

IDAC:

Surveyor:

MARCUS

DOI:

ASSIGNMENT

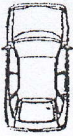
14/03/18

Date / Time:

17/3/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SYU 298H

Name of Insured:

Mg SWEET TET

Insured Tel No.:

HP: 98790033

Excess Sec II :\$

D.O.A: 07/03/18

Is driver the owner?

( YES / NO )

Nature of Accident:

If NO, Driver Name / Age: Mg LAY HONG

Driver Tel No.:

97976106

(V/L: YES / NO)

Claim No.:

S8MODARY / 34355

Policy No.:

GA30548311

Make / Model:

MERCEDES

Place of Accident:

12 UYANG RESIDENT.

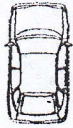
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SLQ 11944



INSRS:

WSP:

Tel:

Liability:

RMKS:

Autolution:



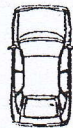
INSRS:

WSP:

Tel:

Liability:

RMKS:



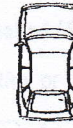
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

| Date/ Time |             | STAGE                             | DATE / PIC                                                   |
|------------|-------------|-----------------------------------|--------------------------------------------------------------|
| 17/3/18    | SLQ 11944 - | Non-Reporting ltr (1st):          |                                                              |
| 17/3/18    | SYU 298H -  | Non-Reporting ltr (2nd):          |                                                              |
| 17/3/18    | Smartclaim  | Non-Reporting ltr (Final):        |                                                              |
| 08/04/18   | 1:00PM      | Notification ltr (if non-pickup): |                                                              |
|            |             | Call OI:                          | 08/04/18 - VC                                                |
|            |             | After call ltr to OI:             |                                                              |
|            |             | Documentation Check List:         | Handler Typist                                               |
|            |             | Notification ltr (if non-pickup)  | <input type="checkbox"/> <input type="checkbox"/>            |
|            |             | After call ltr to OI:             | <input checked="" type="checkbox"/> <input type="checkbox"/> |
|            |             | Authorisation To Act:             | <input checked="" type="checkbox"/> <input type="checkbox"/> |
|            |             | Release Voucher:                  | <input checked="" type="checkbox"/> <input type="checkbox"/> |
|            |             | Final Repair Bill:                | <input checked="" type="checkbox"/> <input type="checkbox"/> |
|            |             | Car Rental Invoice:               | <input checked="" type="checkbox"/> <input type="checkbox"/> |
|            |             | Towing Invoice:                   | <input type="checkbox"/> <input type="checkbox"/>            |
|            |             | LTA / GIA:                        | <input checked="" type="checkbox"/> <input type="checkbox"/> |
|            |             | Medical Bill:                     | <input type="checkbox"/> <input type="checkbox"/>            |
|            |             | PIR:                              | <input type="checkbox"/> <input type="checkbox"/>            |
|            |             | Mandate/Reject Instruction:       | <input checked="" type="checkbox"/> <input type="checkbox"/> |
|            |             | LOD:                              | <input checked="" type="checkbox"/> <input type="checkbox"/> |
|            |             | Payment Breakdown Form:           | <input type="checkbox"/> <input type="checkbox"/>            |
|            |             | Post-Repair Photos:               | <input type="checkbox"/> <input type="checkbox"/>            |
|            |             | Others:                           | <input type="checkbox"/> <input type="checkbox"/>            |

|                                                                                |                                                                       |                                       |
|--------------------------------------------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| PRELIMINARY ADVICE                                                             | Date/Time: 19/03/18                                                   | Sent By: bz                           |
| FINALIZATION                                                                   | Date/Time:                                                            | Confirm with:                         |
| Repair Cost: P/P                                                               | \$S 1,594.80 ( 3 days)                                                | Reduction: 25 %                       |
| FINAL SETTLEMENT                                                               | Date/Time: 22/4/18                                                    | Confirm with: HAWBETH                 |
| Final Liability:                                                               | % 100 (Agreed / Assessed)                                             | BOLA S/N No. : 22                     |
| Repair Cost: (w/loss)                                                          | \$S 1,702.44                                                          |                                       |
| Loss of Rental (LOR) (w/loss)                                                  | \$S 117.70 ( 1 days)                                                  | x \$ 110.00                           |
| Loss of Use (LOU):                                                             | \$S - (\$ x days)                                                     |                                       |
| Loss of Income (LOI):                                                          | \$S - (\$ x days)                                                     |                                       |
| LOR only <input checked="" type="checkbox"/> LOU only <input type="checkbox"/> | LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/> | [Tick only one]                       |
| GIA/LTA Search                                                                 | \$S 200                                                               |                                       |
| Medical:                                                                       | \$S -                                                                 |                                       |
| Disbursement:                                                                  | \$S -                                                                 | (e.g. Tow/ Independent )              |
| Legal Cost                                                                     | \$S -                                                                 |                                       |
| Total:                                                                         | \$S 1,826.14                                                          | Global Sum \$S: -                     |
| FINAL PAYMENT                                                                  | Date/Time:                                                            | Confirm with:                         |
| Payee 1:                                                                       | \$S 1,826.14                                                          | Name 1: AUTOLUTION INDUSTRIAL PTE LTD |
| Payee 2: (Strike if N.A.)                                                      | \$S -                                                                 | Name 2: -                             |
| Payee 3: (Strike if N.A.)                                                      | \$S -                                                                 | Name 3: -                             |