15/5/2010

| | |
|---|---|
| INS. CASE OWNER: | CC 3/1111800 7094, Kjaa3 |

LKK:
IDAC:

## ASSIGNMENT

Surveyor: KSL    DOI: 16-4-18    Date / Time: 16-4-18

Registered in Merimen: 17-4-18

**Pre-assign / CCU / FTE**

SHA 7611 R

| | | | | |
|---|---|---|---|---|
| Insured Vehicle No. | : SHA 7611 R | Claim No. | : | |
| Name of Insured | : | Policy No. | : | |
| Insured Tel No. | : HP: | Make / Model | : | |
| **Excess Sec II :S$** | D.O.A : 13-04-18 | Place of Accident | : | |
| 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**

STC 5354K

| INSRS: | INSRS: | INSRS: | INSRS: |
|---|---|---|---|
| WSP: Tranj-cab | WSP: | WSP: | WSP: |
| Tel : | Tel : | Tel : | Tel : |
| Liability : | Liability : | Liability : | Liability : |
| RMKS: | RMKS: | RMKS: | RMKS: |

| Date/ Time | | STAGE | DATE / PIC |
|---|---|---|---|
| | STC5354K, W3/Tmr 7018303/Erbn2 :DOA: 4/9/18 | Non-Reporting ltr (1st): | |
| | SHA 7611R, X | Non-Reporting ltr (2nd): | |
| | | Non-Reporting ltr (Final): | |
| | | Notification ltr (if non-pickup): | |
| 23/04/2020 | Pls refer to Views for details. | 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: | Confirm by: |
|---|---|---|---|
| Repair Cost: L/sum | S$ 2,450.00 ( 2 days) Reduction: 95 % | | Email ☐ Call ☐ |

| FINAL SETTLEMENT | Date/Time: 23/04/2020 | Confirm with: Wai Yin | Email ✓ Call ☐ |
|---|---|---|---|
| Final Liability: | % 100 (Agreed / Assessed) BOLA S/N No. :27 | | If NO or B 28, Ass. Lia : |
| Repair Cost w/GST | S$ 2,621.50 | | |
| Loss of Rental (LOR): | S$ 304.38 ( 3 days) x $101.46 | | |
| Loss of Use (LOU): | S$ ( $ x days) | | |
| Loss of Income (LOI): | S$ 120.00 ($40.00 x 3 days) | | |
| LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ✓ [Tick only one] | | | |
| GIA/LTA Search | S$ | | |
| Medical: | S$ | | 1) Claim status: Normal/~~Reject/Private Settle~~ |
| Disbursement: | S$ (e.g. Tow/ Independent ) | | 2) Report Format: TP |
| Legal Cost | S$ | | 3) Survey fee: $600.00 |
| Total: | S$ 3,045.88 | Global Sum S$: 3,000.00 | |

| FINAL PAYMENT | Date/Time: | Confirm with: | Email ✓ Call ☐ |
|---|---|---|---|
| Payee 1: | S$ 3,000.00 | 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: | |