CC6/AIG18020148/Aea3

15/5/2010

INS. CASE OWNER: CC6 /AIG1802 [illegible] | LKK: | IDAC:

**ASSIGNMENT**

Surveyor: Admin DOI: 5/11/18 Date / Time : 5/11/18

Registered in Merimen: 9/11/18

**Pre-assign / CCU / FTE**

Insured Vehicle No. : SDA 7705Z Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

**Excess Sec II :S$** D.O.A : 10/16 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**

YM 7701H → → →

| | | | |
|---|---|---|---|
| INSRS: | INSRS: Hua Meng | INSRS: | INSRS: |
| WSP: | WSP: | WSP: | WSP: |
| Tel : | Tel : | Tel : | Tel : |
| Liability : | Liability : | Liability : | Liability : |
| RMKS: | RMKS: | RMKS: | RMKS: |

| Date/ Time | | STAGE | DATE / PIC |
|---|---|---|---|
| | YM7701H-Y SDA7705A-X | 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: Confirm by: LWP

Repair Cost: L/S S$ 2,500.00 ( 4 days) Reduction: 75 % Email [ ] Call [ ]

**FINAL SETTLEMENT** Date/Time: 08.09.21 Confirm with JING YEE Email [ ] Call [ ]

| | | |
|---|---|---|
| Final Liability: | % 100 (Agreed / Assessed) BOLA S/N No. : 27 | If NO or B 28, Ass. Lia : |
| Repair Cost: | S$ 2,500.00 | OID REAR ENDED TP |
| Loss of Rental (LOR): | S$ - ( days) | |
| Loss of Use (LOU): | S$ 400.00 ($ 100 x 4 days) | |
| Loss of Income (LOI): | S$ - ($ x days) | |
| LOR only [ ] LOU only [✓] LOR + LOU [ ] LOR + LO [ ] [Tick only one] | | |
| GIA/LTA Search | S$ 7.45 | |
| Medical: | S$ - | 1) Claim status: Normal/[redacted] |
| Disbursement: | S$ - (e.g. Tow/ Independent ) | 2) Report Format: TP |
| Legal Cost | S$ - | 3) Survey fee: $320 |
| **Total:** | **S$ 2,907.45** **Global Sum S$:** | |

**FINAL PAYMENT** Date/Time: 08.09.21 Confirm with: JING YEE Email [ ] Call [ ]

| | | | |
|---|---|---|---|
| Payee 1: | S$ 2,907.45 | Name 1: | HUA MENG SPRAY PAINTING WORKSHOP |
| Payee 2: (Strike if N.A.) | S$ | Name 2: | |
| Payee 3: (Strike if N.A.) | S$ | Name 3: | |