15/5/2010

	cc 4, 111 1900 0311 , pa3	LKK:
INS. CASE OWNER:		IDAC:

ASSIGNMENT

Surveyor: _Three pte_ DOI: _7/1/9_ Date / Time : _7/1/19_

Registered in Merimen: _7/1/19_

Pre-assign / CCU / FTE SHc 8091 Z

Insured Vehicle No. : _SHc 8091 Z_   Claim No. : _____

Name of Insured : _____   Policy No. : _____

Insured Tel No. : _____ HP: _____   Make / Model : _____

Excess Sec II :S$ _____ D.O.A : _1-1.19_   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**

SLH 81044 →   →   →   →

INSRS:	INSRS:	INSRS:	INSRS:
WSP: World Auto	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time		STAGE	DATE / PIC
	SLH 81044, x;	Non-Reporting ltr (1st):	
	SHc 80912 - CCU/M170208 /uha3q7 : DOA 7/1/19	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:	
Repair Cost:	S$ (days) Reduction: %		Email ☐ Call ☐	

FINAL SETTLEMENT	Date/Time:	Confirm with	Email ☐ Call ☐
Final Liability:	% (Agreed / Assessed) BOLA S/N No. :	If NO or B 28, Ass. Lia :	
Repair Cost:	S$		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ ($ x 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:	
Legal Cost	S$	3) Survey fee:	
Total:	S$ Global Sum S$:		

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$	Name 1:	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	

Surveyor Hwee Sie   REF: III

From: Date: 07/01/19   Veh No. SLH 8104 Y   Yr Regn: 18 Nov 2016

Estimated Cost: Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

OD / TP / WS / TP RES / OD RES / EVA / INV / MV   Truck / Trailer or

To Inspect Vehicle No: SLH 8104 Y   Make: Honda Shuttle   c.c 1496

at Workshop m/s   world Auto   Colour Grey   A/C: Insured / Std / NI / NA

of   No. 1 Kunji soup   Sp. Reading 124697   T/Radio: Insured / Std / NI / NA

Insured.   Eng/No: —

Policy No.   C/No: GP71043472

Claims No.   Gen. Cond: Good / Fair / Poor / Burnt

Sum Insured: Excess: Steering: Inorder / Jammed / Leaked / Burnt or

(Client's Record)   Brake: Inorder / Jammed / Leaked / Burnt or

Make of Veh: Modi: Nil / S/Rim / STD A/Rim or

                                               Tyre Size: F: 185/60 R15

(Policy Condition)   R: —

Remark: The veh had commenced its   BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

        repair at the time of inspection.   TOYO / YOKO or   Rovelo

	N/S	O/S

Bal. or Market Value: Front   Rear

IDAC Accident Rport: Consistent? : Yes or No   R/Bal. 6   mm   R/Bal. 6   mm

GIA / PR Seen: Consistent? : Yes or No   L/Bal. 8   mm   L/Bal. 6   mm

Est. Repairs: days   Res.: Yes or No   D.O.A. 1/1/19   D.O.I. 7/1/19

Lum Sum: %   3 Val.: Yes or No   Survey held at   world Auto

CA / REV / REP. / 24 HRS Cup   Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or

                          Vehicle: IN / OUT

Date: Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction

Date/Time, File Pass to? [ ] : Preli. Report   Days Of Repair:

1)   [ ] : Final Report   Resurvey No. of Trip: Survey Fee:

Date/Time, File Return to?   Transportation:

2)   Add Fee: [ ] : Site Insp ($) S + RS   SI

                                   [ ] : Interview ($) Photos

Report Format :   [ ] : Tech. Invs ($) Others

Lump Sum / I.B.I: ($) [ ] : Weekend   ($)

                                                    TOTAL