INS. CASE OWNER: RA | CC 4, Asm 1900 504J, J fa3 | LKK: IDAC: 105316

ASSIGNMENT

Surveyor: OHJ DOI: 21/3/2019 Date / Time : 20/3/19

Registered in Merimen: –

Pre-assign / CCU / FTE

Insured Vehicle No. : XD1959Y Claim No. : 59M01HFS

Name of Insured : APSU CONTRACTOR PTE P/L Policy No. : hx

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 18/3/19 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**

SG5587S → → →

INSRS: WSP: SMRT ... Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SG5587S - X ; XD1959Y - X

STAGE	DATE / PIC
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: OHJ

Repair Cost: P/P S$2675.12 (3 days) Reduction: 422 % 14 Email [ ] Call [ ]

FINAL SETTLEMENT	Date/Time: 08/04/2020 Confirm with WEI TECK	Email ✓ Call [ ]
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 2675.12	
Loss of Rental (LOR):	S$ (days)	
Loss of Use (LOU):	S$ 900.00 ($ 300 x 3 days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only [ ] LOU only [✓] LOR + LOU [ ] LOR + LOI [ ] **[Tick only one]**		
GIA/LTA Search	S$ 7.00	
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: $350.00
Total:	S$ 3582.12 **Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ✓ Call [ ]
Payee 1:	S$ 3582.12	Name 1:	SMRT BUSES LIMITED
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	