15/5/2010

INS. CASE OWNER: | CC 3/IIII900 5682, Kg6352 | LKK: IDAC:

ASSIGNMENT

Surveyor: Fennctn. DOI: 29/7/19 Date / Time : 29/7/19.

Registered in Merimen: 1/4/19

Pre-assign / CCU / FTE

Insured Vehicle No. : SHC 8865H

Name of Insured : LTM

Insured Tel No. : HP:

Excess Sec II :S$ D.O.A : 27/7/19.

Is driver the owner? (YES / NO) Nature of Accident :

If NO, Driver Name / Age : ANTHONY ON KENG SENG

Driver Tel No. : (V/L: YES / NO)

Claim No. :

Policy No. : MCM1100 US

Make / Model : HYUNDAI

Place of Accident : GEYLANG LOR 22

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

Insured Liability : % **Final ? Yes / No**

SHD 9714. → →

INSRS: WSP: trans cab. Tel : Liability : RMKS:

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Date/ Time		**STAGE**	**DATE / PIC**
	SHD9714 - Φ	Non-Reporting ltr (1st):	
	SHC8865H - LTM [illegible]	Non-Reporting ltr (2nd):	
27/7/19 -	Seek liability (Pending approval). approved	Non-Reporting ltr (Final):	
	PIR uploaded in Merimen.	Notification ltr (if non-pickup):	
2/9.	(pending finalised) file pass KSC to finalised	Call OI:	
	& to get final est.	After call ltr to OI:	

Documentation Check List:	**Handler**	**Typist**
Notification ltr (if non-pickup):	X	
After call ltr to OI:	X	
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:		

1/10 - File pass RT type report.

16/12 - Pending mandate approval

5/2 * (To create Audatex inv) *

File pass CHT.

PRELIMINARY ADVICE Date/Time: Sent By: Confirm by: Kenneth. Email Call

FINALIZATION Date/Time: Confirm with:

Repair Cost: PIP S$ 17,292.92 (4 days) Reduction: $3614.41 % x4 Email ✓ Call

FINAL SETTLEMENT Date/Time: 19/05/2021 Confirm with WAI YIN

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 15

If NO or B 28, Ass. Lia : OI change to TP lane.

Repair Cost: (w/GST)	S$	14,180.62
Loss of Rental (LOR):	S$	621.60 (6 days) x $103.60
Loss of Use (LOU):	S$	— ($ x days)
Loss of Income (LOI):	S$	240.00 ($ 40 x 6 days)
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☑		[Tick only one]
GIA/LTA Search	S$	—
Medical:	S$	—
Disbursement:	S$	— (e.g. Tow/ Independent)
Legal Cost	S$	—
Total:	**S$**	15,042.22.

Global Sum S$: ~~15,000.00~~

1) Claim status: Normal/Reject/Private Settle

2) Report Format: TP

3) Survey fee: $600.00

FINAL PAYMENT Date/Time: Confirm with: Email ✓ Call

Payee 1:	S$ 15,042.22	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:	