15/5/2010

INS. CASE OWNER: Wangyilun | CC 4, Asm 1900 5712, Gh a3 | LKK: IDAC: 107628

ASSIGNMENT

Surveyor: Xar | DOI: 2/4/19 | Date / Time : 1/4/2019

Registered in Merimen: –

Pre-assign / CCU / FTE

Insured Vehicle No. :	SKR 2062H	Claim No. :	S9M01IKG
Name of Insured :	Chong Hor Siong	Policy No. :	
Insured Tel No. :	HP:	Make / Model :	
Excess Sec II :S$	D.O.A : 29/3/2019	Place of Accident :	
Is driver the owner? ((YES) / NO)	Nature of Accident :		

If **NO**, Driver Name / Age :

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

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

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

SKV4471B → SKR2062H → SJL2826P → SLA968K → SLK4497Z → SJB63

SKV4471B → SKR2062H	SJL2826P	SLA968K	SLK4497Z → SJB63
INSRS:	INSRS:	INSRS:	INSRS:
WSP:	WSP: Cas Garage.	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability : OI	Liability : TP	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time	
	SJL2826P - MMFWD1900S645Z4 ; DOA: 29/3/19
	- CC4/FWD1801876314Q63 02 ; DOA: 10/10/18
	SKR2062H - "
13/04/2020	PLS SEE VIEWS FOR DETAILS

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:

Repair Cost: L/sum S$ 10,200.00 (10 days) Reduction: 66 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 13/04/2020 Confirm with Nicole Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0%
Repair Cost:	S$ 10,200.00	
Loss of Rental (LOR):	S$ 1,100.00 (11 days) x $100	
Loss of Use (LOU):	S$ ($ x days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only ☐	LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]	
GIA/LTA Search	S$ 7.45	
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: $350.00
Total:	S$ 11,307.45 **Global Sum S$:** 11,300.00	

FINAL PAYMENT Date/Time: Confirm with: Email ☑ Call ☐

Payee 1:	S$ 11,300.00	Name 1:	CAS GARAGE PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	