INS. CASE OWNER: KC. | CC 4 /AXA1900 87,373 , K 987 s3 | IDAC

ASSIGNMENT

Surveyor: Kenneth | DOI: 28/5/19 | Date / Time: 14/5/19

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No.	SJK 3837E	Claim No.	SAMI2MRKF / 115690
Name of Insured	ELIZABETH TAY CHH JUAN	Policy No.	VPY ...
Insured Tel No. :	HP:	Make / Model :	PEUGEOT
Excess Sec II :S$	D.O.A : 6/5/19.	Place of Accident :	SLOTTS ... ROAD
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

SKT 8493Y → ______ → ______ → ______

INSRS: WSP: motor image. Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time		
	SKT8493Y - X SJK3837E - X	
	* amount claim.	
19/8/19	— OI ~~road~~ rear end	
04/09/2020.	settled & closed (file in drawer).	

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	Sally 18/8/19.
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 (circled)	☑	☐
Medical Bill:	☐	☐
PIR:	☐	☐
Mandate (circled)/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: P/P S$ 1,455.20 (3 days) Reduction: 73.28 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 03/09/2020 Confirm with SLOW HOOI Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed (circled)) BOLA S/N No. VA .	If NO or B 28, Ass. Lia :
Repair Cost: (w/gst)	S$ 1,557.06	
Loss of Rental (LOR): (w/gst)	S$ 385.20 (4 days) X $ 90.00	
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 (circled)/LTA Search	S$ 2.00	
Medical:	S$ —	1) Claim status: Normal (circled)/Reject/Private Settle
Disbursement:	S$ — (e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$ —	3) Survey fee: $350.00
Total:	S$ 1,944.26 **Global Sum S$:** —	

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

Payee 1:	S$ 1,944.26	Name 1: MOTOR ENTERPRISES ~~PTE~~ PTE LTD.
Payee 2: (Strike if N.A.)	S$ —	Name 2: IMAGE —
Payee 3: (Strike if N.A.)	S$ —	Name 3: —