15/5/2010

INS. CASE OWNER: priya | CC 4/1111901 0 384 / [illegible] | LKK: | IDAC:

ASSIGNMENT

Surveyor: Chandra. DOI: 18/6/19 Date / Time : 19/6/19

Registered in Merimen: 19/6/19.

Pre-assign / CCU / FTE

Insured Vehicle No. : SHA 5455L. Claim No. :

Name of Insured : CTBL Policy No. : MCI 0001 19

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

Excess Sec II :S$ D.O.A : 8/6/19. Place of Accident : Yio Yishun Ave 6 Up

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

If **NO**, Driver Name / Age : Chua Kiam Choon

Driver Tel No. : (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

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

SLC 7854 → → →

INSRS: WSP: Hwi Yang. Tel : Liability : RMKS:

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Date/ Time	
	SLC7854L-A SHA5455L-A
19/6/19	Email wkshop liability unclear.
19/6/19	Receive CCTV from TP.
14/6/19	Seek liability via merimen
25/6/19	Seek liability via merimen
1/7/19	liability clear via merimen
3/7/19	File pass to typist type report
22/7/19	Seek mandate via merimen

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: LS S$ 750.00 (2 days) Reduction: 74 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 23/9/2020 Confirm with Rel Email ☑ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : NIL If NO or B 28, Ass. Lia :

Repair Cost: w/GST S$ 802.50

Loss of Rental (LOR): S$ — (— days)

Loss of Use (LOU): S$ 120.00 ($ 69 x 2 days)

Loss of Income (LOI): S$ ($ x days)

LOR only ☐ LOU only ☑ LOR + LOU ☐ LOR + LO ☐ **[Tick only one]**

GIA/LTA Search S$ —

Medical: S$ —

Disbursement: S$ — (e.g. Tow/ Independent)

Legal Cost S$ —

1) Claim status: Normal/Reject/Private Settle

2) Report Format: 1

3) Survey fee: $350.00

Total: S$ 922.50 **Global Sum S$:** 920.00

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

Payee 1:	S$ 920.00	Name 1:	Hwi Yang Motor Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	