15/5/2010

INS. CASE OWNER: CC4/111 190 12782/TLwa3

LKK:
IDAC:

ASSIGNMENT

Surveyor: Taufiek DOI: 19/7/2019 Date / Time: 18/07/2019

Registered in Merimen: 19/7/19

Pre-assign / CCU / FTE

Insured Vehicle No. : SHA7641D		Claim No. :	
Name of Insured :		Policy No. :	
Insured Tel No. :	HP:	Make / Model :	
Excess Sec II :S$	D.O.A : 17/07/2019	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**

SHC9247Z → → →

INSRS: WSP: Ding Auto Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SHC9247Z - CC4/ASM/19007074/TLwa3 ; DOA: 18/4/19
	-NS/1/NZ/18003683/KLhon2 ; DOA: 15/2/18
	SHA7641D - CC3/MI/18013545/KFb3 ; DOA. 18/7/18
	CC4/111/18006072/SPb3S2 ; DOA: 11/4/18
15/04/2020	Pls refer to 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$ 3,600.00 (6 days)	Reduction: 65 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 20/03/2020	Confirm with DD	Email ✓ Call ☐
Final Liability:	% 50	(Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
w/GST Repair Cost: 3,852.00	S$ 1,926.00		
Loss of Rental (LOR) 546.50	S$ 273.25 (5 days) x $109.30		
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI) 200.00	S$ 100.00 $40 x 5 days)		
LOR only ☐ LOU only ☐	LOR + LOU ☐ LOR + LOI ✓ [Tick only one]		
GIA/LTA Search	S$ 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: $500.00
Total:	S$ 2,306.70	**Global Sum S$:** 2,300.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ✓ Call ☐
Payee 1:	S$ 2,300.00	Name 1: Ding Automotive Pte. Ltd.	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	