15/5/2010

INS. CASE OWNER: CC 3 / ASM 190 13060 / K pa3

LKK:

IDAC:

ASSIGNMENT

Surveyor: Kenneth DOI: 23/7/19 Date / Time: 23/7/19

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : SMK 5795U

Name of Insured :

Insured Tel No. : HP:

Excess Sec II :S$ D.O.A : 20/7/19

Is driver the owner? (YES / NO)

If NO, Driver Name / Age :

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

Claim No. :

Policy No. :

Make / Model :

Place of Accident :

Nature of Accident :

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

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

SMK 5795U → SHD 5888G → SGM 1897X →

SMK 5795U	SHD 5888G	SGM 1897X	
INSRS:	INSRS:	INSRS:	INSRS:
WSP:	WSP: Trans-Cab	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS: (01)	RMKS: (TP)	RMKS:	RMKS:

Date/ Time		STAGE	DATE / PIC
	SHD 5888G: CC4/ASM K012875 |pb3; D.O.A: 20/7/19 SMK 5795U : X	Non-Reporting ltr (1st):	
		Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
05/05/2020	Pls refer to Views for details.	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$ 3,100.00 (5 days) Reduction: 95 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 05/05/2020 Confirm with Wai Yin Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No.: 28	If NO or B 28, Ass. Lia : 100
Repair Cost: w/GST	S$ 3,317.00	
Loss of Rental (LOR):	S$ 680.40 (6 days) x $113.40	
Loss of Use (LOU):	S$ ($ 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: $350.00
Total:	**S$ 4,004.85** **Global Sum S$:**	

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

Payee 1:	S$ 4,004.85	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:	