

INS. CASE OWNER: CHAN KUAN HENG

CC4/AIG19014468/ K ha3

LKK:

IDAC:

Surveyor:

KSC

DOI:

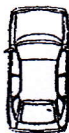
ASSIGNMENT

19/08/2019

Date / Time : 19/08/2019

Registered in Merimen: 19/08/2019

Pre-assign / CCU / FTE



Insured Vehicle No. : SMG 7986T

Claim No. : 8343694456G

Name of Insured : Lee Smele Hui

Policy No. :

Insured Tel No. : HP:

Make / Model :

Excess Sec II : S\$

D.O.A : 15/08/2019

Place of Accident :

Is driver the owner? (YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

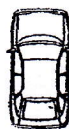
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. :

(V/L: YES / NO)

Insured Liability : % Final ? Yes / No

SMJ 8172C

INSRS:
WSP: HUI YANG
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SMJ 8172C - X	SMG 7986T - X	STAGE	DATE / PIC
			Non-Reporting ltr (1st):	
			Non-Reporting ltr (2nd):	
			Non-Reporting ltr (Final):	
			Notification ltr (if non-pickup):	
26/08/19			Call OI:	
			After call ltr to OI:	26/08/19 - vic
			Documentation Check List:	Handler Typist
			Notification ltr (if non-pickup)	☐
02/10/19			After call ltr to OI:	☒
			Authorisation To Act:	☒
			Release Voucher:	☒
05/12/19			Final Repair Bill:	☒
10/12/19			Car Rental Invoice:	☒
11/12/19			Towing Invoice	☐
			LTA / GIA :	☒
			Medical Bill:	☐
			PIR:	☐
			Mandate/Reject Instruction:	☒
			LOD	☒
			Payment Breakdown Form:	☐
			Post-Repair Photos:	☐
			Others:	☐

PRELIMINARY ADVICE		Date/Time:	Sent By:		Confirm by:	
FINALIZATION		Date/Time:	Confirm with:		Email ☐ Call ☐	
Repair Cost:	P/R	S\$ 3,228.56	(2 days)	Reduction:	%	
FINAL SETTLEMENT		Date/Time:	Confirm with:		Email ☒ Call ☐	
Final Liability:	%	100	(Agreed / Assessed)	BOLA S/N No. :	27	
Repair Cost:	(w/ GST)	S\$ 3,454.56	(OI RATE-ENDED TP)			
Loss of Rental (LOR)	(w/ GST)	S\$ 214.00	(2 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\$	2.00				
Medical:	S\$	-				
Disbursement:	S\$	-	(e.g. Tow/ Independent)			
Legal Cost	S\$	-				
Total:	S\$	3,670.56	Global Sum S\$:			
FINAL PAYMENT		Date/Time:	Confirm with:		Email ☐ Call ☐	
Payee 1:	S\$	3,670.56	Name 1:	HUI YANG MOTOR PTE LTD		
Payee 2: (Strike if N.A.)	S\$	-	Name 2:	-		
Payee 3: (Strike if N.A.)	S\$	-	Name 3:	-		