CC4/III19014857/Gea3q2

15/5/2010

INS. CASE OWNER: ~~CC 4/III1901 4857/ Geah3~~ | LKK: | IDAC:

ASSIGNMENT

Surveyor: XGQ DOI: 03/09/2019 Date / Time : 21/8/19.

Registered in Merimen: 21/8/19.

Pre-assign / CCU / FTE

Insured Vehicle No. :	SHD 3474E	Claim No. :	
Name of Insured :	CTPL	Policy No. :	MLU...
Insured Tel No. :	HP:	Make / Model :	HYUNDAI
Excess Sec II :S$	D.O.A : 21/7/19.	Place of Accident :	TAMPINES ST 71
Is driver the owner? (YES / NO)	Nature of Accident :		

If NO, Driver Name / Age : Yap Mah Tan

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

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

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

PC 6339D. → → →

INSRS: Yang WSP: Tel : Yun Liability : RMKS: Xin.	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	PC 6339D – LLL/III/19104455/ ... DOA: 21/7/19
	SHD 3474E – X
27/8/19	Seek liability via Merimen
	liability clear 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: XGQ

Repair Cost: L/S S$ 4,500.00 (5 days) Reduction: 59 % Email ☐ Call ☐

FINAL SETTLEMENT	Date/Time: 21.07.21 Confirm with VICTOR		Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27.		If NO or B 28. Ass. Lia :
Repair Cost: w/GST	S$ 4,815.00		
Loss of Rental (LOR):	S$ - (days)		
Loss of Use (LOU):	S$ 720.00 (S 120 x 6 days)		
Loss of Income (LOI):	S$ - (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: $500
Total:	**S$** 5,542.45	**Global Sum S$:**	

FINAL PAYMENT	Date/Time: 21.07.21	Confirm with: VICTOR	Email ☐ Call ☐
Payee 1:	S$ 5,542.45	Name 1:	YANG YUN XIN BUS SERVICE
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	