s3

15/5/2010

INS. CASE OWNER: kc | CC 4 ASM /~~AXA~~ 1901 4877, F p/h

LKK:
IDAC:

ASSIGNMENT

Surveyor: STEVE DOI: 22/8/19. Date / Time : 23/8/19

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. :	SHD 311L	Claim No. :	SGM01Y12/132975
Name of Insured :	TRANS-CAB SERVICES P/L	Policy No. :	VFX/P168V570.
Insured Tel No. :	HP:	Make / Model :	RENAULT.
Excess Sec II :S$	D.O.A : 22/8/19.	Place of Accident :	SERANGOON RD

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

If **NO**, Driver Name / Age : YAP SM TEEK. OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

SHB 5717C →

INSRS: WSP: SMRT. Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SHB9717C – K
	SHD311L – LLX/TMI1901396 [illegible] 6/8/19

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	[illegible] 3/8/19
After call ltr to OI:	[illegible]

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: P/P S$ 1354.88 (3 days) Reduction: 81 % Email ☐ Call ☐

FINAL SETTLEMENT	Date/Time: 28/2/2020 Confirm with	Email ☑ Call ☐
Final Liability:	% 50 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: 1354.88	S$ 677.44	
Loss of Rental (LOR) 466.52	S$ 233.26 (4 days) x $ 116.63	
Loss of Use (LOU):	S$ – (S x days)	
Loss of Income (LOI):	S$ – (S x days)	
LOR only ☑ LOU only ☐	LOR + LOU ☐ LOR + LOI ☐ [Tick only one]	
GIA/LTA Search	S$ –	
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: $350.00
Total:	**S$** 910.70 **Global Sum S$:** 900.00	

FINAL PAYMENT	Date/Time: Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 900.00	Name 1: SMRT Taxis Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:
Payee 3: (Strike if N.A.)	S$	Name 3: