INS. CASE OWNER:	CC 3/CTI1901 5200, Kd63.	LKK:
		IDAC:

ASSIGNMENT

Surveyor: Kenneth.   DOI: 27|8|19.   Date / Time: 24|8|19.

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. :	PC 4895C	Claim No. :
Name of Insured :		Policy No. :
Insured Tel No. :	HP:	Make / Model :
Excess Sec II :S$	D.O.A : 15|8|19.	Place of Accident :
Is driver the owner? (YES / NO)	Nature of Accident :	

If **NO**, Driver Name / Age :

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

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

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

SML 5389K →

INSRS: Trans	INSRS:	INSRS:	INSRS:
WSP: Cab.	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time			STAGE	DATE / PIC
	PCV8495C	NBN|CTI19019710|9 02NH. 15|8|19	Non-Reporting ltr (1st):	
	SML5389K		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:		

PRELIMINARY ADVICE Date/Time:		Sent By:	Post-Repair Photos:		
			Others:		

FINALIZATION	Date/Time:	Confirm with:	Confirm by:	
Repair Cost:	S$ 7,650.00 (5 days)	Reduction: 86 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 17/06/2020	Confirm with: Ng Wai Yin	Email ✓ Call
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: (w/GST)	S$ 8,185.50		
Loss of Rental (LOR):	S$ 678.93 (7 days) X $96.99		
Loss of Use (LOU):	S$ - (S x days)		
Loss of Income (LOI):	S$ 350.00 (S 50 x 7 days)		
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOU ✓ [Tick only one]			
GIA/LTA Search	S$ 7.49		
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: $400
Total:	S$ 9,221.92	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐	
Payee 1:	S$ 9,221.92	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:	