15/5/2010

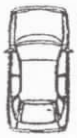
INS. CASE OWNER: Ler, Bernard | CC4/AIG19017000/Kea3 | LKK: IDAC:

ASSIGNMENT

Surveyor: KENNETH DOI: 26.09.2019 Date / Time : 26.09.2019

Registered in Merimen: 26.09.2019

Pre-assign / CCU / FTE



Insured Vehicle No. : SLZ 7916H Claim No. :

Name of Insured : HOO SHU YEE Policy No. : 1800056018

Insured Tel No. : HP: +65-92984563 Make / Model : SUBARU XV-1.6 I-S AWD CVT (A)

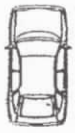
Excess Sec II :S$ D.O.A : 25/09/2019 13:30 Place of Accident : JUNCTION BETWEEN TAI HWAN HEIGHTS & JALAN PACHELI

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

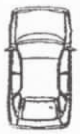
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

SJV 7544S → → →



INSRS:
WSP: CHEW GOON
Tel : MOTOR
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SJV7544S - X SLZ 7916H - CC3/AIG18013199/K1eb3q2; DOA: 18.07.18

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: KSC
Repair Cost: L/S	S$ 5,500.00 (4 days)	Reduction: 33 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 11.12.20	Confirm with KELLY	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 5,885.00	OI REAR ENDED TP	
Loss of Rental (LOR) w/GST	S$ 898.80 (6 days)	x $140	
Loss of Use (LOU):	S$ - ($ 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$ -		1) Claim status: Normal/~~Reject/Private Settle~~
Disbursement:	S$ -	(e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$ -		3) Survey fee: $320
Total:	S$ 6,785.80	**Global Sum S$:**	
FINAL PAYMENT	Date/Time: 11.12.20	Confirm with: KELLY	Email ☐ Call ☐

Payee 1:	S$ 6,785.80	Name 1:	CHEW GOON MOTOR
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	