CC6/AIG19018151/Abb3

15/5/2010

INS. CASE OWNER: | CC 6 /AIG1901 8151 / Abb3 | LKK: | IDAC:

ASSIGNMENT

Surveyor: Adrian | DOI: 14/10/19 | Date / Time : 14/10/19 | Registered in Merimen: 15/10/19.

Pre-assign / CCU / FTE

Insured Vehicle No. :	SLT 5466J	Claim No. :	0026932034SG
Name of Insured :		Policy No. :	
Insured Tel No. :	HP:	Make / Model :	
Excess Sec II :S$	D.O.A : 7/10/19.	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**

SME 9930B → SLT 5466J → SLJ 9301C →

INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS: 0I	INSRS: Kang WSP: Tel : Liability : RMKS: TP	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SLJ 9301C - x
	SLT 5466J - 14/10/19 ... 14/9/19 ... = 7/10/19
05/06/2020	SETTLED AND CLOSED

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:
Repair Cost: L/S	S$ 4,100.00 (4 days)	Reduction: 41.31 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time 05/06/2020	Confirm with SHARON	Email X Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0%
Repair Cost: (W/GST)	S$ 4,387.00		
Loss of Rental (LOR):	S$	(days)	3 veh.c.c.; OI 2nd car
Loss of Use (LOU):	S$ 240.00	($ 60 x 4 days)	
Loss of Income (LOI):	S$	($ x days)	
LOR only ☐	LOU only X	LOR + LOU ☐ LOR + LO ☐	**[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: $320.00
Total:	**S$** 4,629.00	**Global Sum S$:** 4,600.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 4,600.00	Name 1: KANG CAR REPAIRERS PTE LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	

ASS. REC. BY: | REF:

ASSIGNMENT

From: | Date:

Estimated Cost: $

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured: | Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: **The veh had commenced its repair at the time of inspection.**

N/S	O/S

Bal. or Market Value:

IDAC Accident Rport: | Consistent? : Yes or No

GIA / PR Seen: | Consistent? : Yes or No

Est. Repairs: days | Res.: Yes or No

Lum Sum: % | 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: | Person Contacted:

Veh No: SLJ93016. | Yr Regn: 2016 / Dec

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or

Make: Audi A4 | c.c 1395

Colour Black. | A/C: Insured / Std / NI / NA

Sp.Reading 33195 | T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: WAUZZZF42HA056388

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi : Nil / S/Rim / STD A/Rim or

Tyre Size: F: 205/60R16.

R: 205/60R16.

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Continental.

Front		Rear	
R/Bal.	06 mm	R/Bal.	06 mm
L/Bal.	06 mm	L/Bal.	06 mm
D.O.A.		D.O.I.	14/10/19.

Survey held at Kany.

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	TP A/G.
	MV :
	PV :
	Nett.

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

☐ : Preli. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weekend ($)

Report Format :

Lump Sum / I.B.I: ($)

Survey Fee:	
Transportation:	
$ + RS $	
Photos	
Others	
TOTAL	