

INS. CASE OWNER:

CC6/CTI19018974/Ada3

LKK:
IDAC:

ASSIGNMENT

Surveyor:

ADRIAN

DOI: 23/10/19

Date / Time : 23/10/19

Registered in Merimen: _____

Pre-assign / CCU / FTE



Insured Vehicle No. : PC 7956R

Name of Insured : JOSEPH COACH PTE. LTD.

Insured Tel No. : _____ HP: _____

Excess Sec II :S\$ _____ D.O.A : 22.10.2019

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

If NO, Driver Name / Age : _____

Driver Tel No. : _____

(V/L: YES / NO)

Claim No. : _____

Policy No. : _____

Make / Model : YUTONG ZK6119H AUTO

Place of Accident : UPP SERANGOON ROAD > HOUGANG

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

Insured Liability : % Final ? Yes / No

SMD 5580J

INSRS:
WSP: CAS GARAGE
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	STAGE	DATE / PIC
SMD 5580J - X	Non-Reporting ltr (1st):	
PC 7956R - NA/INC19008155/z4; DOA: 07.05.19	Non-Reporting ltr (2nd):	
- NA/INC19010625/h4; DOA: 14.06.19	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\$ 19,500.00 (18 days) Reduction: 52 %		Email ☐ Call ☐
FINAL SETTLEMENT Date/Time: 18/05/2020 Confirm with Nicole		Email ☒ Call ☐
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :
Repair Cost: S\$ 19,500.00		
Loss of Rental (LOR): S\$ - (days)		
Loss of Use (LOU): S\$ 1,600.00 (\$ 80 x 20 days)		
Loss of Income (LOI): 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 Report/Independent
Disbursement: S\$ 128.40 (e.g. Tow/ Independent)		2) Report Format: TP
Legal Cost S\$ -		3) Survey fee: \$400
Total: S\$ 21,235.85 Global Sum S\$:		
FINAL PAYMENT Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1: S\$ 21,235.85 Name 1: Cas Garage Pte Ltd		
Payee 2: (Strike if N.A.) S\$ Name 2:		
Payee 3: (Strike if N.A.) S\$ Name 3:		