

INS. CASE OWNER: **Bennie Tan**

CC6/AIG19019380/Uda3

LKK:

IDAC:

ASSIGNMENTSurveyor: **MARCUS**DOI: **18/11/2019**Date / Time: **04.11.2019**Registered in Merimen: **04.11.2019****Pre-assign / CCU / FTE**Insured Vehicle No. : **SLR 1640J**Claim No. : **4517314529SG**Name of Insured : **ASIA CARZ LEASING PTE LTD**Policy No. : **999994026**

Insured Tel No. : _____ HP: _____

Make / Model : **TOYOTA SIENTA****Excess Sec II :S\$** _____ D.O.A : **30/10/2019 13:30**Place of Accident : **ALONG BRADDELL RD BEFORE TOA PAYOH NORTH**Is driver the owner? (YES / ☒ NO) Nature of Accident : _____If NO, Driver Name / Age : **NOOR AIDY BIN ABDUL RAHMAN**OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NODriver Tel No. : **+65-97426952** (V/L: ☒ YES / NO)Insured Liability : _____ % **Final ? Yes / No****SLU 9218C**INSRS:
WSP: **HOCK WAH**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SLR 1640J - X	SLU 9218C - X	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:	Confirm by:
FINALIZATION		Date/Time:	Confirm with:	Confirm by:
Repair Cost:	S\$ 3,000.00	(5 days) Reduction: 52 %	Email ☐ Call ☐	
FINAL SETTLEMENT		Date/Time: 16/07/2020	Confirm with Anysia	Email ☒ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost: (w/GST)	S\$ 3,210.00			
Loss of Rental (LOR):	S\$ 500.00	(5 days) X \$100		
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\$ 7.45			
Medical:	S\$ -		1) Claim status: Normal Report Format: TP	
Disbursement:	S\$ -	(e.g. Tow/ Independent)	2) Report Format: TP	
Legal Cost	S\$ -		3) Survey fee: \$320	
Total:	S\$ 3,717.45	Global Sum S\$:	Email ☐ Call ☐	
FINAL PAYMENT		Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S\$ 3,717.45	Name 1:	Hock Wah Motor Workshop Pte Ltd	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		