15/5/2010

INS. CASE OWNER: Bennie | CC 3/AIG1901 9626 , KX6352 | LKK: IDAC:

Done

ASSIGNMENT

Surveyor: Kenneth. DOI: 5/11/19. Date / Time : 5/11/19.

Registered in Merimen: 6/11/19.

Pre-assign / CCU / FTE

Insured Vehicle No. :	SMF 1253U	Claim No. :	
Name of Insured :	Hui Wai Wong	Policy No. :	1800124440.
Insured Tel No. :	HP:	Make / Model :	KIA
Excess Sec II :S$	D.O.A : 2/11/19.	Place of Accident :	Punggol Road.
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**

GBH 7796A → SMF 1253U → SHD 46K →

INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS: 01	INSRS: trans WSP: Tel : Cab. Liability : RMKS: TP	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SHD 46K - X SMF 1253U - X
2/4/2020 Khanching	File pass to type mandate

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	8/1/2020
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: 45	S$ 3,200 (4 days)	Reduction: 57 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 12/1/2021	Confirm with Wai Yin	Email ☑ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0 (3 VEH C.C ; 01 2ND)
Repair Cost: 4624	S$ 3424.00		
Loss of Rental (LOR):	S$ 283.96 (3.5 days) × $81.13		
Loss of Use (LOU):	S$ — ($ x days)		
Loss of Income (LOI):	S$ 175.00 ($50 x 3.5 days)		
LOR only ☐	LOU only ☐ LOR + LOU ☐ LOR + LOI ☐	[Tick only one]	
GIA/LTA Search	S$ 7.45		
Medical:	S$ —		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$	(e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$ — 3,890.41		3) Survey fee: $320.00
Total:	S$ ~~3890.45~~	Global Sum S$: 3890.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 3890.00	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:	