15/5/2010

INS. CASE OWNER: Lionel Tan | CC4/FWD19020068/Apa3 | LKK: IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 12/11/2019 Date / Time : 11.11.2019

Registered in Merimen: 12.11.2019

Pre-assign / CCU / FTE

Insured Vehicle No. : SGK 7775K Claim No. :

Name of Insured : MUTHUKRISHNAN RAGHURAM Policy No. : PNPV2019-00014023

Insured Tel No. : HP: +65-92969765 Make / Model : TOYOTA CAMRY 2.0 AUTO ABS AIRBAG

Excess Sec II :S$ D.O.A : 31.10.2019 Place of Accident : MAKENA CONDO MEYER ROAD

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

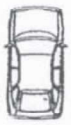
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

SLL 6636X → → →

INSRS:
WSP: HO BENG
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SLL 6636X - X SGK 7775K - X	
13/04/2020	PLS SEE VIEWS FOR DETAILS	

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/sum	S$ 1,900.00 (4 days) Reduction: 70 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 13/04/2020	Confirm with Chris	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 23	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 1,900.00		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 500.00 ($100 x 5 days)		
Loss of Income (LOI):	S$ ($ 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/[redacted]
Disbursement:	S$	(e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$		3) Survey fee: $500.00
Total:	S$ 2,407.45	**Global Sum S$:** 2,400.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 2,400.00	Name 1: Ho Beng Trading	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	