15/5/2010

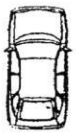
INS. CASE OWNER: CC 4 /AIG1902 0179 / T/ d63 9/11 | LKK: | IDAC:

## ASSIGNMENT

Surveyor: _____ DOI: _____ Date / Time : 17/11/19

Registered in Merimen: 17/11/19

**Pre-assign / CCU / FTE**



Insured Vehicle No. : SCX 414C

Name of Insured : CHANG KENG KENG ADRIAN.

Insured Tel No. : _____ HP: _____

**Excess Sec II :S$** _____ D.O.A : 10/11/19.

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

Claim No. : _____

Policy No. : 1700076984.

Make / Model : MERCEDES.

Place of Accident : OUT OF FRONT KLAMER RD TO GRANGE RD

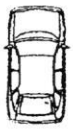
If **NO**, Driver Name / Age :

Driver Tel No. : (V/L: YES / NO )

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

Insured Liability : % **Final ? Yes / No**

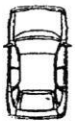
FBN 5379C → _____ → _____ → _____



INSRS:
WSP: Karz
Tel :
Liability : WORKS.
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

| Date/ Time | |
|---|---|
| | FBN 5379C → SCX 414C → |
| 3/3/2020 | FILE PASS TO TYPIST MAHADIK |

| 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: S$ 2850.00 ( 5 days) Reduction: 69 % Email ☐ Call ☐

**FINAL SETTLEMENT** Date/Time: 26/08/2020 Confirm with Ricia Email ✓ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 5 If NO or B 28, Ass. Lia :

Repair Cost: S$ 2850.00

Loss of Rental (LOR): S$ 280.00 ( 7 days) × $40

Loss of Use (LOU): S$ - ($ x days)

Loss of Income (LOI): S$ - ($ x days)

LOR only ✓ LOU only ☐ LOR + LOU ☐ LOR + LO ☐ **[Tick only one]**

GIA/LTA Search S$ 36.49

Medical: S$ -

Disbursement: S$ - (e.g. Tow/ Independent )

Legal Cost S$ -

1) Claim status: Normal/Reject/Private Settle

2) Report Format: TP

3) Survey fee: $320

**Total:** S$ 3166.49 **Global Sum S$:**

**FINAL PAYMENT** Date/Time: Confirm with: Email ☐ Call ☐

| | | | |
|---|---|---|---|
| Payee 1: | S$ 3166.49 | Name 1: | Karz Works Pte Ltd |
| Payee 2: (Strike if N.A.) | S$ | Name 2: | |
| Payee 3: (Strike if N.A.) | S$ | Name 3: | |