15/5/2010

INS. CASE OWNER: CC 6/CTI1901 1230 , G/163

LKK:
IDAC:

ASSIGNMENT

Surveyor: XGQ DOI: 2/12/19. Date / Time : 2/12/19.

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : SLQ 3661R. Claim No. : SNM19D205697C02

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 29/11/19. Place of Accident :

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**

SHD 1871E → → →

INSRS: WSP: Tel : Liability : RMKS: premier.

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INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SHD1871E — + SLQ3661R +
	SETTLED AND CLOSED

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:	X	
Authorisation To Act:	X	
Release Voucher:	X	
Final Repair Bill:	X	
Car Rental Invoice:	X	
Towing Invoice		
LTA / GIA :	X	
Medical Bill:		
PIR:		
Mandate/Reject Instruction:	X	
LOD	X	
Payment Breakdown Form:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: L/S S$ 1,000.00 (2 days) Reduction: 27.13 % Email [ ] Call [ ]

FINAL SETTLEMENT Date/Time: 24/04/2020 Confirm with SHAFAWATI Email [X] Call [ ]

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: (W/GST)	S$ 1,070.00	OI REAR ENDED TP
Loss of Rental (LOR):	S$ 298.53 (3 days) X $99.51	
Loss of Use (LOU):	S$ - ($ x days)	
Loss of Income (LOI):	S$ 150.00 ($50.00 x 3 days)	
LOR only [ ] LOU only [ ] LOR + LOU [ ] LOR + LO [X] [Tick only one]		
GIA/LTA Search	S$ 2.00	
Medical:	S$ -	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ - (e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$ -	3) Survey fee: $400.00
Total:	S$ 1,520.53 **Global Sum S$:** 1,500.00	

FINAL PAYMENT Date/Time: Confirm with: Email [ ] Call [ ]

Payee 1:	S$ 1,500.00	Name 1:	PREMIER AUTOMOTIVE SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$ -	Name 2:	-
Payee 3: (Strike if N.A.)	S$ -	Name 3:	-

ASS. REC. BY: Gul. REF: CTI

ASSIGNMENT

From: Date: 2/12/19

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SHD187IE

at Workshop m/s premier Automotive

of 23 changi south Ave 2 # 01-02

Insured:

Policy No.

Claims No.

Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: **The veh had commenced its repair at the time of inspection.**

N/S	O/S

Bal. or Market Value:

IDAC Accident Rport: Consistent? : **Yes** or **No**

GIA / PR Seen: Consistent? : **Yes** or **No**

Est. Repairs: 2 days Res.: **Yes** or **No**

Lum Sum: 20 % 3 Val.: **Yes** or **No**

CA / REV / REP. / 24 HRS 'up

Vehicle: **IN / OUT**

Date: Person Contacted:

Veh No: SHB187IE Yr Regn: 23 Dec 2014

Type: **M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /**

Truck / Trailer or

Make: KIA optima 1.7 c.c 1684

Colour Silver A/C: **Insured / Std / NI / NA**

Sp.Reading 378268 T/Radio: **Insured / Std / NI / NA**

Eng/No:

C/No: KNAGM414MF556 1600

Gen. Cond: **Good / Fair / Poor / Burnt**

Steering: **Inorder / Jammed / Leaked / Burnt** or

Brake: **Inorder / Jammed / Leaked / Burnt** or

Modi : **Nil / S/Rim / STD A/Rim** or

Tyre Size: F: 205/65R16

R: 11

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or Hankook

Front		Rear	
R/Bal.	5 mm	R/Bal.	5 mm
L/Bal.	5 mm	L/Bal.	5 mm
D.O.A.		D.O.I.	02-12-19

Survey held at W/S 5:30pm

Des. of Damages : **Frt / Rear / O/S / N/S / U/C / Rooftop** or

The **U/C / Chassis frame / Body Structure** affected due to collision.

Date / Time	Action / Instruction
	L/S = $1000.00
	R= $2685.70/ 27.13%

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

☐ : Preli. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weekend ($)

Report Format :

Lump Sum / I.B.I: ($)

Survey Fee:	
Transportation:	
S + RS SI	
Photos	
Others	
TOTAL	