rs3

15/5/2010

INS. CASE OWNER: CC 4/AIG190 21a16 / Q[illegible]

LKK:

IDAC:

ASSIGNMENT

Surveyor: Sun Pr[illegible]   DOI: 11/12/19   Date / Time : 11/12/19

Registered in Merimen: 17/12/19.

Pre-assign / CCU / FTE

Insured Vehicle No. : SDU 40B.		Claim No. :	
Name of Insured :		Policy No. :	
Insured Tel No. :	HP:	Make / Model :	
Excess Sec II :S$	D.O.A : 11/12/19.	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**

SLB 4487A → → →

INSRS: WSP: LCR. Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time		
	SLB4487A – T SDU40B – 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:	
FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: L/SUM	S$ 3,350.00 (5 days)	Reduction: 49 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 30.12.2020	Confirm with MR SIM	Email ✓ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 3,584.50		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 300.00 ($ 60 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$ 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: 320.00
Total:	**S$** 3,886.50	**Global Sum S$:**	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 3,886.50	Name 1: LION CITY RENTALS PTE LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	

ASS. REC. BY: Sun Pin | REF:

ASSIGNMENT

From: ____ Date: ____

Estimated Cost: ____

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

To Inspect Vehicle No: ____

at Workshop m/s ____

of ____

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.

Bal. or Market Value: ____

IDAC Accident Rport: ____ Consistent? : Yes or No

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

Est. Repairs: ____ days Res.: Yes or No

Lum Sum: ____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: ____ Person Contacted: ____

Veh No: SLB 4487 A Yr Regn: 07/04/2016

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

Truck / Trailer or ____

Make: Toyota Corolla Axio 1.5X c.c 1496

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

Sp.Reading 592401 T/Radio: Insured / Std / NI / NA

Eng/No: -

C/No: NRE161001710

Gen. Cond: Good / (Fair) / Poor / Burnt

Steering: (Inorder) / Jammed / Leaked / Burnt or ____

Brake: (Inorder) / Jammed / Leaked / Burnt or ____

Modi: NII / S/Rim / (STD A/Rim) or ____

Tyre Size: F: 185/60 R15

R: 185/60 R15

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

TOYO / YOKO or Firenza

Front		Rear	
R/Bal.	5 mm	R/Bal.	5 mm
L/Bal.	5 mm	L/Bal.	5 mm
D.O.A.	11/12/2019	D.O.I.	11/12/2019

Survey held at LCR

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
	MV: 50k
	PV = 35,377
	NV = 14,623

Date/Time, File Pass to?

1) ____

Date/Time, File Return to?

2) ____

☐ : Prell. Report

☐ : Final Report

Days Of Repair: ____

Resurvey No. of Trip: ____

Add Fee: ☐ : Site Insp ($ ____)

☐ : Interview ($ ____)

☐ : Tech. Invs ($ ____)

☐ : Weekend ($ ____)

Report Formed : ____

Lump Sum / L.P.I: ____

Survey Fee:	
Transportation: ___$ + RS.___SI	
Photos	
Others	
TOTAL	