15/5/2010

INS. CASE OWNER: CC4 / AIG 2000 0088 / KKS3 | LKK: | IDAC:

ASSIGNMENT

Surveyor: Kenneth DOI: 31/12/19 Date / Time: 30/12/19

Registered in Merimen: 2/1/2020

Pre-assign / CCU / FTE

Insured Vehicle No. : SMA 6689P Claim No. :

Name of Insured : Lee Chia Hsuan Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 26/12/19 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**

SMA 5005U → → →

INSRS: WSP: Guan Motor Tel : Liability : RMKS:

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Date/ Time	
	SMA 5005 U : X ; SMA 6689 P : X
040220 @11.17am	spoke to Ms Lee (OI). OID hit TP from behind. informed TP claim, agree to settle & amount NCD will be affected. sent letter to OI -

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	> 0402 JC
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$ 3250.00 (3 days) Reduction: 53 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 24/3/2021 Confirm with Ah Heng Email ☐ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27 If NO or B 28, Ass. Lia :

Repair Cost: S$ 3250.00 (COLD REAR-ENDED TP)

Loss of Rental (LOR): S$ 600.00 (4 days) X$150.00

Loss of Use (LOU): S$ — ($ x 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$ —

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

Legal Cost S$ —

1) Claim status: Normal/Reject/Private Settle

2) Report Format: OP

3) Survey fee: $320.00

Total: S$ 3857.45 **Global Sum S$:** 3850.00

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

Payee 1:	S$ 3850.00	Name 1:	Guan Motor Works
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	