15/5/2010

INS. CASE OWNER: CC6/CTI20000260/Gda3 | LKK: | IDAC:

ASSIGNMENT

Surveyor: GUO QIANG DOI: 13/01/2020 Date / Time : 06/01/2020

Registered in Merimen: —

Pre-assign / CCU / FTE

X

Insured Vehicle No. : YN 9990M Claim No. : SNM20D200061

Name of Insured : M/S TOH KIM BOCK C-E CONTRACTOR PTE LTD Policy No. : DMCVSN1800961901

Insured Tel No. : HP: Make / Model : ISUZU FTR33

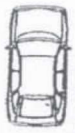
Excess Sec II :S$ D.O.A : 25/12/2019 11:20 Place of Accident : JCT OF OLD CHOA CHU KANG RD & JLN BAHAR

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

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

Driver Tel No. : +65-93546523 (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SLX 789P → → →



INSRS:
WSP: Automotive
Tel : Repair Centre
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SLX 789P - X YN 9990M - 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: S$ 3,200.00 (3 days) Reduction: 60 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 26/05/2020 Confirm with Lin Shu Juan Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: (w/GST)	S$ 3,424.00	
Loss of Rental (LOR): (w/GST)	S$ 321.00 (3 days) X $100	
Loss of Use (LOU):	S$ - ($ x days)	
Loss of Income (LOI):	S$ - ($ x days)	
LOR only ✓ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S$ 2.00	
Medical:	S$ -	1) Claim status: Normal [redacted]
Disbursement:	S$ - (e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$ -	3) Survey fee: $400
Total:	S$ 3,747.00 **Global Sum S$:**	

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

Payee 1:	S$ 3,747.00	Name 1:	Automotive Repair Centre Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	