

INS. CASE OWNER:

MERINA CHIA

CC4/FCI20000592/T1da3

LKK:

IDAC:

ASSIGNMENT

Surveyor:

TAUFIKH

DOI: 14/01/2020

Date / Time : 08/01/2020

Registered in Merimen: _____

X

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 7545M

Claim No. : D19008063MFSH

Name of Insured : CITYCAB PTE LTD

Policy No. : D-19092579MFSH

Insured Tel No. : _____ HP: _____

Make / Model : HYUNDAI AE IONIQ HEV-1.6 (A)

Excess Sec II : S\$

D.O.A : 20/12/2019 15:45

Place of Accident : ALONG PIE TOWARDS CHANGI AIRPORT

Is driver the owner? (YES / ☒ NO)

Nature of Accident : _____

If NO, Driver Name / Age : ANG ENG TAT

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

Driver Tel No. : +65-90540778

(V/L: YES / NO)

Insured Liability : % Final ? Yes / No

SGZ 1789C

INSRS:
WSP: CYCLE &
Tel: CARRIAGE KIA
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	STAGE	DATE / PIC
SHC7545M - CC3/AIG16016317/M1wb3s2; DOA:27.08.16	Non-Reporting ltr (1st):	
- CC3/FCI14012489/Kvm3d1; DOA: 21.3.14	Non-Reporting ltr (2nd):	
SGZ 1789C - X	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\$ 4,676.00 (5 days) Reduction: 50 %	Email ☐ Call ☐	
FINAL SETTLEMENT Date/Time: 15/06/2020 Confirm with Loi Ai Ting	Email ☒ Call ☐	
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost: (w/GST) S\$ 5,003.32		
Loss of Rental (LOR)(w/GST) S\$ 642.00 (6 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\$ -		
Medical: S\$ -		
Disbursement: S\$ - (e.g. Tow/ Independent)		
Legal Cost S\$ -		
Total: S\$ 5,645.32 Global Sum S\$:		
FINAL PAYMENT Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1: S\$ 5,645.32 Name 1: Cycle & Carriage Kia Pte Ltd		
Payee 2: (Strike if N.A.) S\$ Name 2:		
Payee 3: (Strike if N.A.) S\$ Name 3:		

1) Claim status: Normal ~~Report Format: TP~~

2) Report Format: TP

3) Survey fee: \$350