

INS, CASE OWNER:

CC 4/A16 2000 1683 / Qes3

IDAC:

Surveyor:

OSP

DOI:

ASSIGNMENT

30/1/2020

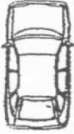
Date / Time :

30/1/2020

Registered in Merimen:

31/1/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SDW 818P
 Name of Insured : Lim Ai Choo @ Agnes Lim
 Insured Tel No. : _____ HP: _____
 Excess Sec II : \$S _____ D.O.A : 27/1/2020
 Is driver the owner? (YES / NO) Nature of Accident : _____

Claim No. : _____
 Policy No. : _____
 Make / Model : _____
 Place of Accident : _____

If NO, Driver Name / Age :

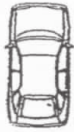
Driver Tel No. :

(V/L: YES / NO)

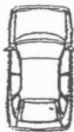
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % Final ? Yes / No

SLE 6123X



INSRS:
WSP: LCR
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SLE 6123X : X , SDW 818P : 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
			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: <u>OSP</u>	
Repair Cost:	<u>L/S</u> \$S <u>6,950.00</u>	(<u>7</u> days) Reduction:	<u>45</u> %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: <u>08.02.21</u>	Confirm with: <u>TRISTAN</u>	Email ☐ Call ☐	
Final Liability:	% <u>100</u>	(Agreed / Assessed) BOLA S/N No. : <u>27</u>	If NO or B 28, Ass. Lia :	
Repair Cost:	<u>w/GST</u> \$S <u>7,436.50</u>	<u>OI REAR ENDED TP</u>		
Loss of Rental (LOR):	\$S -	(<u> </u> days)		
Loss of Use (LOU):	\$S <u>420.00</u>	(\$ <u>60</u> x <u>7</u> days)		
Loss of Income (LOI):	\$S <u>✓</u>	(\$ <u> </u> x <u> </u> days)		
LOR only ☐ LOU only ☒	LOR + LOU ☐ LOR + LOI ☐	[Tick only one]		
GIA/LTA Search	\$S <u>2.00</u>			
Medical:	\$S -			
Disbursement:	\$S <u>160.50</u>	(e.g. Tow/ <u>Independent</u>)	1) Claim status: Normal/ <u>Reject/ Private Settle</u>	
Legal Cost	\$S -	2) Report Format: <u>TP</u>		3) Survey fee: <u>\$320</u>
Total:	\$S <u>8,019.00</u>	Global Sum \$S: <u>8,000.00</u>		
FINAL PAYMENT	Date/Time: <u>08.02.21</u>	Confirm with: <u>TRISTAN</u>	Email ☐ Call ☐	
Payee 1:	\$S <u>8,000.00</u>	Name 1:	<u>LION CITY RENTALS PTE LTD</u>	
Payee 2: (Strike if N.A.)	\$S	Name 2:		
Payee 3: (Strike if N.A.)	\$S	Name 3:		