

INS. CASE OWNER: Chan Kian Meng

CC6/AIG20001684/Qda3

LKK:

IDAC:

ASSIGNMENT

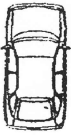
Surveyor: OI SUN PIN

DOI: 30/01/2020

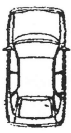
Date / Time : 30/01/2020

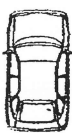
Registered in Merimen: 31/01/2020

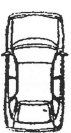
Pre-assign / CCU / FTE

	Insured Vehicle No. :	SGG 3956C	Claim No. :	0487748452SG
	Name of Insured :	ISHAK BIN MOHALI	Policy No. :	1900087555
	Insured Tel No. :	HP: 97523409	Make / Model :	TOYOTA WISH 1.8 A
	Excess Sec II :S\$	D.O.A : 21/01/2020 18:30	Place of Accident :	ALONG RACE COURSE RD NEAR TO MUTHU'S CURRY RESTAURANT
Is driver the owner? (☒ YES / NO) Nature 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

SLH 4570K


 INSRs:
WSP: LION CITY
Tel: RENTALS
Liability:
RMKS:


 INSRs:
WSP:
Tel:
Liability:
RMKS:


 INSRs:
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 INSRs:
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Liability:
RMKS:

 INSRs:
WSP:
Tel:
Liability:
RMKS:

Date/ Time	STAGE	DATE / PIC
	SLH 4570K	
	SGG 3956C - CC4/LPC18022438/Kka3n2; DOA: 11.12.18	
	- NA/INC15010543/d2; DOA: 24.06.15	
25/2 W. Subum	Letter sent	
	Non-Reporting ltr (1st):	
	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
	Call OI:	
	After call ltr to OI:	7 20/2 Jc.
	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\$ 1700.00	(3 days) Reduction: 70 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 30/01/2020	Confirm with: Spm	Email ☒ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: (w/hst)	S\$ 1819.00		
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
Total:	S\$ 2121.00	Global Sum S\$:	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S\$ 2121.00	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:	