

INS. CASE OWNER:

MERINA CHIA

CC4/FCI20002678/Uda3

LKK:

IDAC:

ASSIGNMENT

Surveyor:

MARCUS

DOI: 17/02/2020

Date / Time: 17/02/2020

Registered in Merimen: _____

X

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 185P

Claim No. : D20000991MFSH

Name of Insured : CITYCAB PTE LTD

Policy No. : D-20094921MFSH

Insured Tel No. : _____ HP: _____

Make / Model : HYUNDAI IONIQ

Excess Sec II : S\$ _____ D.O.A : 12/02/2020 11:45

Place of Accident : ALONG BOON KENG RD TOWARDS KEMPAS RD

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

If NO, Driver Name / Age : ONG HOR THONG ALOYSIUS

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

Driver Tel No. : +65-91806215 (V/L: YES / NO)

Insured Liability : % Final ? Yes / No

GBC 3368E



INSRS: SME MOTOR

WSP: _____
Tel : _____
Liability : _____
RMKS: _____

INSRS: _____

WSP: _____
Tel : _____
Liability : _____
RMKS: _____

INSRS: _____

WSP: _____
Tel : _____
Liability : _____
RMKS: _____

INSRS: _____

WSP: _____
Tel : _____
Liability : _____
RMKS: _____

Date/ Time	STAGE	DATE / PIC
GBC 3368E - X	Non-Reporting ltr (1st):	
SHC 185P - CC3/AIG17024051/K1ea3q2 ; DOA: 16.12.17	Non-Reporting ltr (2nd):	
CC3/CAI15009557/H1wa3s2 ; DOA : 06.06.15	Non-Reporting ltr (Final):	
CS/FCI12021578/Cvd1 ; DOA : 01.11.12	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:	☐
PRELIMINARY ADVICE Date/Time: _____ Sent By: _____	Post-Repair Photos:	☐
	Others:	☐
FINALIZATION Date/Time: _____ Confirm with: _____ Confirm by: _____		
Repair Cost: S\$ 4,550.00 (6 days) Reduction: 63 %	Email ☐ Call ☐	
FINAL SETTLEMENT Date/Time: 05/08/2020 Confirm with Ying	Email ☒ Call ☐	
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 5	If NO or B 28, Ass. Lia :	
Repair Cost: (w/GST) S\$ 4,868.50		
Loss of Rental (LOR): S\$ 640.00 (8 days) X \$80		
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\$ -	1) Claim status: Normal Report Format	
Disbursement: S\$ - (e.g. Tow/ Independent)	2) Report Format: TP	
Legal Cost S\$ -	3) Survey fee: \$500	
Total: S\$ 5,515.95 Global Sum S\$:		
FINAL PAYMENT Date/Time: _____ Confirm with: _____	Email ☐ Call ☐	
Payee 1: S\$ 5,515.95 Name 1: SME Motor Pte Ltd		
Payee 2: (Strike if N.A.) S\$ _____ Name 2: _____		
Payee 3: (Strike if N.A.) S\$ _____ Name 3: _____		