

INS. CASE OWNER:

ASSIGNMENT

Surveyor: **STEVE CHEN**

DOI: **24/02/2020**

Date / Time: **24/02/2020**

Registered in Merimen: _____

Pre-assign / CCU / FTE



Insured Vehicle No. : **XD 8345Y**
 Name of Insured : **SOON LI HENG CIVIL ENGINEERING PTE LTD**
 Insured Tel No. : _____ HP: _____
 Excess Sec II :\$ _____ D.O.A : **21/02/2020**
 Is driver the owner? (YES / NO) Nature of Accident : _____

Claim No. : _____
 Policy No. : **Z19VC05003236**
 Make / Model : **MITSUBISHI FV51JJD4RDEA-12.9 D (M)**
 Place of Accident : **JUNCTION OF TUAS SOUTH AVE 3 & TUAS SOUTH AVE 2**

If NO, Driver Name / Age : **LI JINBO**
 Driver Tel No. : **+65-98160706** (V/L: YES / NO)

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO
 Insured Liability : % **Final ? Yes / No**

SMP 1878P



INSRS:
WSP: **SK**
Tel: **AUTOMOBILE**
Liability:
RMKS:



INSRS:
WSP:
Tel:
Liability:
RMKS:



INSRS:
WSP:
Tel:
Liability:
RMKS:



INSRS:
WSP:
Tel:
Liability:
RMKS:

Date/ Time	SMP 1878P - X	XD 8345Y - 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)	<input type="checkbox"/>
			After call ltr to OI:	<input checked="" type="checkbox"/>
			Authorisation To Act:	<input checked="" type="checkbox"/>
			Release Voucher:	<input checked="" type="checkbox"/>
			Final Repair Bill:	<input checked="" type="checkbox"/>
			Car Rental Invoice:	<input checked="" type="checkbox"/>
			Towing Invoice	<input type="checkbox"/>
			LTA / GIA :	<input checked="" type="checkbox"/>
			Medical Bill:	<input type="checkbox"/>
			PIR:	<input type="checkbox"/>
			Mandate/Reject Instruction:	<input checked="" type="checkbox"/>
			LOD	<input checked="" type="checkbox"/>
			Payment Breakdown Form:	<input type="checkbox"/>
			Post-Repair Photos:	<input type="checkbox"/>
			Others:	<input type="checkbox"/>
PRELIMINARY ADVICE Date/Time:			Sent By:	
FINALIZATION Date/Time:			Confirm with:	Confirm by:
Repair Cost:	S\$ 6,650.00	(7 days) Reduction: 65 %	Email <input type="checkbox"/>	Call <input type="checkbox"/>
FINAL SETTLEMENT Date/Time:	19/05/2020	Confirm with Julie	Email <input checked="" type="checkbox"/>	Call <input type="checkbox"/>
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost: (w/GST)	S\$ 7,115.50			
Loss of Rental (LOR(w/GST)	S\$ 963.00	(9 days) x 100		
Loss of Use (LOU):	S\$ -	(\$ x days)		
Loss of Income (LOI):	S\$ -	(\$ x days)		
LOR only <input checked="" type="checkbox"/>	LOU only <input type="checkbox"/>	LOR + LOU <input type="checkbox"/>	LOR + LOI <input type="checkbox"/> [Tick only one]	
GIA/LTA Search	S\$ 2.00			
Medical:	S\$ -		1) Claim status: Normal/ Complex/ Disputed/ Denied	
Disbursement:	S\$ -	(e.g. Tow/ Independent)	2) Report Format: TP	
Legal Cost	S\$ -		3) Survey fee: \$400	
Total:	S\$ 8,080.50	Global Sum S\$: 8,050.00		
FINAL PAYMENT Date/Time:			Confirm with:	Email <input type="checkbox"/>
Payee 1:	S\$ 8,050.00	Name 1: SK Automobile Pte Ltd		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		