*15/5/2010

INS. CASE OWNER: Kian-Meng | CC6/AIG20003239/ Uba3 | LKK: IDAC:

ASSIGNMENT

Surveyor: DOI: Date / Time : 26/02/2020

Registered in Merimen: 26/02/2020

Pre-assign / CCU / FTE

X

Insured Vehicle No. : SMM 1126S		Claim No. :	5355765682SG
Name of Insured : PARNG JIUN JENG		Policy No. :	1900107400
Insured Tel No. :	HP: 98192513	Make / Model :	MERCEDES-BENZ E300
Excess Sec II :S$	D.O.A : 24/02/2020	Place of Accident :	DUNEARN RD / HILLCREST RD
Is driver the owner? (YES / NO)	Nature of Accident :		
If **NO**, Driver Name / Age :		OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO	
Driver Tel No. :	(V/L: YES / NO)	Insured Liability : %	**Final ? Yes / No**

SLA 3172U → →

INSRS: WSP: HOCK WAH MOTOR WORKSHOP Tel : Liability RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time		
	SLA 3172U - X SMM 1126S - X	
	- OI & TP VIDEO FOOTAGE IN. UPLOADED IN MERIMEN.	
	- OI TURNING LEFT FROM MIDDLE LANE	
30/3	letter sent.	
21/08/2020	settled & closed (file in drawer).	

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:	→ 30/3

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: P/P	S$ 999.50 (3 days) Reduction: 66.01 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 21/08/2020	Confirm with	Email ☑ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 3	If NO or B 28, Ass. Lia :
Repair Cost: (w/gst)	S$ 1,069.47		(OI TURNING FROM MIDDLE LANE)
Loss of Rental (LOR):	S$ 360.00 (3 days) x $120.00		
Loss of Use (LOU):	S$ -	($ x days)	
Loss of Income (LOI):	S$ -	($ x days)	
LOR only ☑ LOU only ☐	LOR + LOU ☐ LOR + LOI ☐	[Tick only one]	
GIA/LTA Search	S$ 2.00		1) Claim status: Normal/Reject/Private Settle
Medical:	S$ -		2) Report Format: TP
Disbursement:	S$ -	(e.g. Tow/ Independent)	3) Survey fee: $320.00
Legal Cost	S$ -		
Total:	S$ 1,431.47	**Global Sum S$:** 1,400.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 1,400.00	Name 1: HOCK WAH MOTOR WORKSHOP PTE LTD	
Payee 2: (Strike if N.A.)	S$ -	Name 2: -	
Payee 3: (Strike if N.A.)	S$ -	Name 3: -	