15/5/2010

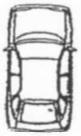|			
INS. CASE OWNER:	CC 41 AIG 2000 3250 / H ~~X~~ s 3 ^b	LKK:	
		IDAC:	

ASSIGNMENT

Surveyor: LHA   DOI: 27/2/2020   Date / Time: 26/2/2020

Registered in Merimen: 27/2/2020

Pre-assign / CCU / FTE
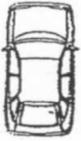
Insured Vehicle No. : SMD 9523 Z   Claim No. : 3817227556SG

Name of Insured :   Policy No. :

Insured Tel No. :   HP: Make / Model :

Excess Sec II :S$ D.O.A : 17/2/2020   Place of Accident :

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

If **NO**, Driver Name / Age :   OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

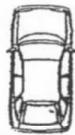Driver Tel No. :   (V/L: YES / NO)   Insured Liability :   %   **Final ? Yes / No**

SPY 4431K →   →   →

INSRS:	INSRS:	INSRS:	INSRS:
WSP: KT Garage	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:
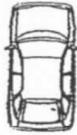
Date/ Time		STAGE	DATE / PIC
	SPY 4431K : X ; SMD 9523 Z : X	Non-Reporting ltr (1st):	
		Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	
		After call ltr to OI:	

		Documentation Check List:	Handler	Typist
		Notification ltr (if non-pickup)		
		After call ltr to OI	✓	
		Authorisation To Act:	✓	
		Release Voucher:	✓	
		Final Repair Bill:	✓	
		Car Rental Invoice:	✓	
		Towing Invoice		
		LTA / GIA :		
02/10/2020	**SETTLED AND CLOSED / FILE IN DRAWER**	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: L/S   S$ 2,200.00 (6 days) Reduction: 25.34 %   Email ☐ Call ☐

FINAL SETTLEMENT   Date/Time: 25/09/2020   Confirm with DARLA BALINGIT   Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0%	
Repair Cost: (W/GST)	S$ 2,354.00		
Loss of Rental (LOR):(W/GST)	S$ 749.00 (7 days) X $100.00	3 veh.c.c.; OID 2nd car	
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ ($ x days)		
LOR only ✓ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]			
GIA/LTA Search	S$		
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: $320.00	
Total:	S$ 3,103.00 **Global Sum S$:** 3,100.00		

FINAL PAYMENT   Date/Time: Confirm with: Email ☐ Call ☐

Payee 1:	S$ 3,100.00	Name 1: KT GARAGE PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:
Payee 3: (Strike if N.A.)	S$	Name 3: