

INS. CASE OWNER: CHAN KIAN MENG

CC4/AIG20003360/T1ba3

LKK:
IDAC:

ASSIGNMENT

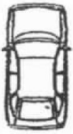
Surveyor: TAUFIKH

DOI: 04/03/2020

Date / Time : 27/02/2020

Registered in Merimen: 28/02/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SKS 9030Z

Claim No. : 9186370905SG

Name of Insured : SANADHYA SUDHANSHU

Policy No. : 2100413673

Insured Tel No. : HP: +65-98325012

Make / Model : LAND ROVER RANGE ROVER-3.0 D TDV6 T

Excess Sec II :S\$ D.O.A : 20/02/2020 21:05

Place of Accident : CROSS JUNCTION MARINA BLVD/SHEARES AVENUE

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

SJR 5212J



INSRS:
WSP: TEAMWORK
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	STAGE	DATE / PIC
<u>SJR 5212J - NA/LPC19008451/z4; 12.5.19</u>	Non-Reporting ltr (1st):	
<u>SKS 9030Z - X</u>	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 :	☒
	Medical Bill:	☐
	PIR:	☐
	Mandate/Reject Instruction:	☒
	LOD	☒
	Payment Breakdown Form:	☐
	Post-Repair Photos:	☐
	Others:	☐

PRELIMINARY ADVICE	Date/Time:	Sent By:	Confirm by:
FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: <u>L/S</u>	S\$ <u>8,400.00</u> (<u>7</u> days) Reduction: <u>53.33</u> %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: <u>19/05/2021</u>	Confirm with <u>SHU SHAN</u>	Email ☒ Call ☐
Final Liability:	% <u>50</u> (Agreed / Assessed) BOLA S/N No. : <u>NIL</u>		If NO or B 28, Ass. Lia :
Repair Cost (w/GST) <u>8,988.00</u>	S\$ <u>4,494.00</u>		
Loss of Rental (LOR):	S\$ (days)		
Loss of Use (LOU): <u>800.00</u>	S\$ <u>400.00</u> (\$ <u>100</u> x <u>8</u> days)		<u>conflicting version</u>
Loss of Income (LOI):	S\$ (\$ x days)		
LOR only ☐ LOU only ☒	LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S\$ <u>36.45</u>		
Medical:	S\$		
Disbursement:	S\$ (e.g. Tow/ Independent)		
Legal Cost	S\$		
Total:	S\$ <u>4,930.45</u>	Global Sum S\$: <u>4,700.00</u>	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S\$ <u>4,700.00</u>	Name 1: <u>TEAMWORK GARAGE PTE LTD</u>	
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	