15/5/2010

INS. CASE OWNER: CC3 / AIG 2000 3564 / K1153 b | IDAC:

ASSIGNMENT

Surveyor: Kenneth DOI: 3/3/2020 Date / Time: 3/3/2020

Registered in Merimen: 4/3/2020

Pre-assign / CCU / FTE

Insured Vehicle No. : SLK 9813L Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 29/2/2020 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**

SHC 5831A → →

INSRS:
WSP: Trans-cab
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SHC5831A : CC4/AXA1501 2694/K2939Z; DOA: 23/7/15
	SLK9813L : X
12/05/2021	SETTLED AND 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:	

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: L/S S$ 5,950.00 (5 days) Reduction: 90.55 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 11/05/2021 Confirm with AMANDA Email ✓ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 24 If NO or B 28, Ass. Lia :

Repair Cost: (W/GST) S$ 6,366.50

Loss of Rental (LOR): S$ 649.04 (8 days) X $81.13

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/Reject/Private Settle

Disbursement: S$ (e.g. Tow/ Independent) 2) Report Format: TP

Legal Cost S$ 3) Survey fee: $320.00

Total: S$ 7,022.99 **Global Sum S$:** 7,000.00

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

Payee 1: S$ 7,000.00 Name 1: Trans-cab Auto Services Pte Ltd

Payee 2: (Strike if N.A.) S$ Name 2:

Payee 3: (Strike if N.A.) S$ Name 3: