

INS. CASE OWNER:

Bernard Ler

CC4/AIG20003660/Aea3

LKK:

IDAC:

ASSIGNMENT

Surveyor:

ADRIAN

DOI: 05.03.2020

Date / Time : 05.03.2020

Registered in Merimen: 05.03.2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SLT 9301A

Claim No. : 2028211996SG

Name of Insured : Infinite Park

Policy No. : 0999994199

Insured Tel No. : HP: D.O.A : 01/03/2020

Make / Model :

Excess Sec II :S\$

Place of Accident : TAN TYE PLACE

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

SJC 5030X

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

Date/ Time	STAGE	DATE / PIC
SJC 5030X - NA/INC19008158/k4 ; 07.05.19	Non-Reporting ltr (1st):	
SLT 9301A - X	Non-Reporting ltr (2nd):	
OINR. To send out first letter. File pass to Su Li.	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: LWP	
FINALIZATION Date/Time:		Confirm with:		Email ☐ Call ☐	
Repair Cost:	L/S S\$ 5,000.00 (6 days) Reduction: 63 %				
FINAL SETTLEMENT Date/Time: 26.08.20		Confirm with HUEY LEE		Email ☐ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 9	If NO or B 28, Ass. Lia :			
Repair Cost:	w/GST S\$ 5,350.00	OID TURN RH @ T JUNCTION HIT TP			
Loss of Rental (LOR):	S\$ 960.00 (8 days) X \$120				
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			
Total:	S\$ 6,317.45	Global Sum S\$:			
FINAL PAYMENT Date/Time: 26.08.20		Confirm with: HUEY LEE		Email ☐ Call ☐	
Payee 1:	S\$ 6,317.45	Name 1:	SK AUTOMOBILE PTE LTD		
Payee 2: (Strike if N.A.)	S\$	Name 2:			
Payee 3: (Strike if N.A.)	S\$	Name 3:			