15/5/2010

INS. CASE OWNER: CC 4 / LPC20003789 / T2d93

LKK:

IDAC:

ASSIGNMENT

Surveyor: Taufikh DOI: 9/7/2020 Date / Time: 9/3/2020

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : GBB 8726C Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 7/3/2020 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 799T → → →

INSRS:
WSP: Ding Automotive
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SHC 799T - CE3/HAGM01515/H1U6392 DOA: 11/6/17 - CS/FCI1602230/6 DOA: 27/11/16 - CS3/FCI1600896D/E2 Wed 1 DOA: 10/5/16 - CS3/FCIMOD1147/1965 2 DOA: 6/12/16 - NA/LPC20003748/3 4 DOA: 8/3/2020 - NBA/MSG1902367/Y DOA: 1/12/19
	GBB 8726C - CC6/AIGI101419I/Uja3y DOA: 19/7/11 - CC7/AIGD201403 4/Cm1 Up1 DOA: 9/7/12 - NA/LPC20003748/24 DOA: 8/3/20

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: S$ 830.00 (3 days) Reduction: 39 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 07/07/2020 Confirm with DD Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost: (w/GST)	S$ 888.10	
Loss of Rental (LOR):	S$ 413.72 (4 days) X $103.43	
Loss of Use (LOU):	S$ - ($ x days)	
Loss of Income (LOI):	S$ 200.00 ($ 50 x 4 days)	
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ✓ [Tick only one]		
GIA/LTA Search	S$ 2.00	
Medical:	S$ -	1) Claim status: Normal/[redacted]
Disbursement:	S$ - (e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$ -	3) Survey fee: [redacted] $400
Total:	S$ 1,503.82 **Global Sum S$:**	

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

Payee 1:	S$ 1,503.82	Name 1:	Ding Automotive Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	