15/5/2010

INS. CASE OWNER: CC4/LPC20004075/Kea3

LKK:

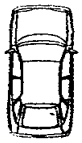
IDAC:

ASSIGNMENT

Surveyor: KENNETH DOI: 09/09/2020 Date / Time : 16/03/2020

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : GBA 6930Y Claim No. : 19/20/20/VC06/023201

Name of Insured : Policy No. : Z/19/VC06/104909

Insured Tel No. : HP: Make / Model :

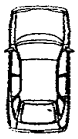
Excess Sec II :S$ D.O.A : 10/03/2020 Place of Accident :

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

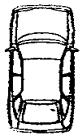
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

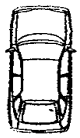
SJM 753Z → → →



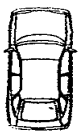
INSRS:
WSP: K.KIM HIN
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		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: KSC

Repair Cost: L/S S$ 1,000.00 (2 days) Reduction: 68 % Email [ ] Call [ ]

FINAL SETTLEMENT Date/Time: 08.07.21 Confirm with CARIN Email [ ] Call [ ]

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL		If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 1,070.00	OID REVERSED AND HIT TP	
Loss of Rental (LOR):	S$ 420.00 (3 days) X $140		
Loss of Use (LOU):	S$ - ($ 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: $400
Total:	**S$** 1,490.00	**Global Sum S$:**	

FINAL PAYMENT Date/Time: 08.07.21 Confirm with: CARIN Email [ ] Call [ ]

Payee 1:	S$ 1,490.00	Name 1:	K KIM HIN AUTO PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	