15/5/2010

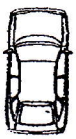
INS. CASE OWNER: LOH CHEE HENG | CC3/AIG20004626/Aga3 | LKK: IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 31/03/2020 Date / Time : 29.03.2020

Registered in Merimen: 29.03.2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SKC 7295Z Claim No. : 4539820215SG

Name of Insured : MUI RAP WAI Policy No. : 2100274774

Insured Tel No. : HP: +65-91010718 Make / Model : BMW 535 3.0 [SEDAN]

Excess Sec II :S$ D.O.A : 26.03.2020 13:40 Place of Accident : STILL ROAD SOUTH

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

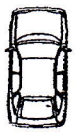
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

SLF 9358K → → →

INSRS:
WSP: PREMIUM
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SLF 9358K - CC3/AIG20000802/Ada3 ; 13.01.2020
	SKC 7295Z - CS/AIG13003682/Ry1d1 ; 12.02.2013
9/5 -	TP NO AVP.
12/6 -	Send LOI (Pending OI AVP)

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	Y CM 9/6/2020.
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: P/P S$ 1957.20 (3 days) Reduction: 5289.80 % 73 Email ☐ Call ☐

FINAL SETTLEMENT	Date/Time: 07/04/2021	Confirm with Kee Seang / NADIA	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27.	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 2094.20	W/GST	
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 180.00 ($ 60 x 3 days)		
Loss of Income (LOI):	S$ ($ x days)		
LOR only ☐ LOU only ☑	LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S$ 2.00		
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: $320.00.
Total:	S$ 2276.20.	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 2276.20	Name 1:	Premium Automobiles Pte Ltd.
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	