

INS. CASE OWNER:

CC 4 / III 2000 5028 / T1ps3

LKK:

IDAC:

ASSIGNMENT

Surveyor:

TAUFIKH

DOI:

07/04/2020

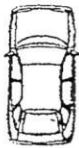
Date / Time :

07/04/2020

Registered in Merimen:

07/04/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 2271K

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : S\$ _____ D.O.A : 01/04/2020

Place of Accident : _____

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

If NO, Driver Name / Age :

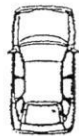
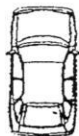
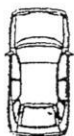
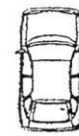
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. :

(V/L: YES / NO)

Insured Liability : % Final ? Yes / No

SKB 8867Y

INSRS:
WSP: CHENG AUTO
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date / Time	STAGE	DATE / PIC
	SKB 8867Y : CC6/AIG15000663/Kza3q2-1 ; DOA : 07/01/2015	
	SHC 2271K : CS/III17008518/Uvbm2 ; DOA : 28/04/2017	
	Non-Reporting ltr (1st):	
	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
	Call OI:	
	After call ltr to OI:	
21/05/2021	Pls refer to Views for details.	
	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:
Repair Cost: L/sum	S\$ 2,354.00 (4 days) Reduction: 57 %	Confirm by:
FINAL SETTLEMENT	Date/Time: 21/05/2021	Confirm with: Murugesan
Final Liability:	% 85 (Agreed / Assessed) BOLA S/N No. : NIL	Email ☒ Call ☐
Repair Cost: 2,354.00	S\$ 2,000.90	If NO or B 28, Ass. Lia :
Loss of Use (LOU):	S\$ 636.65 (7 days) x \$100.00	
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: \$350.00
Total:	S\$ 2,645.00	Global Sum S\$: 2,500.00
FINAL PAYMENT	Date/Time:	Confirm with:
Payee 1:	S\$ 2,500.00	Name 1: CHENG AUTO BODYWORKS
Payee 2: (Strike if N.A.)	S\$	Name 2:
Payee 3: (Strike if N.A.)	S\$	Name 3: