15/5/2010

INS. CASE OWNER: CC4/LPC20006377/Aga3

LKK:

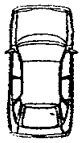
IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 17/06/2020 Date / Time : 17/06/2020

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : GBB 3696M Claim No. : 19/20/20/VC05/0023403

Name of Insured : ARASY COMMUNICATION & SECURITY SYSTEM Policy No. : Z19VC05002899

Insured Tel No. : HP: Make / Model : VOLKSWAGEN CADDY

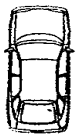
Excess Sec II :S$ D.O.A : 09/06/2020 Place of Accident : FILTERING LANE ENTERING WOODLANDS AVENUE 3

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

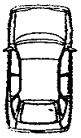
If **NO**, Driver Name / Age : MUHAMMAD NUR AFIQ BIN RAMAN OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

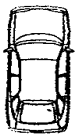
SLL 4432E → → →



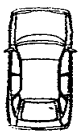
INSRS:
WSP: 1st Autoworks
Tel : Pte Ltd
Liability :
RMKS:



INSRS:
WSP:
Tel : +65-98792482
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SLL 4432E - X	**STAGE**	**DATE / PIC**
	GBB 3696M - CC3/AIG11020404/R1sa3q2 ; 22.9.2011	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:	
PRELIMINARY ADVICE	Date/Time: Sent By:	Post-Repair Photos:	
		Others:	

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: P/P	S$ 1829.70 (3 days)	Reduction: 2312.53 % 55	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 29/09/2020	Confirm with SUHAIMI	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 1957.78 (W/GST)		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 150.00 ($ 50.00 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$ 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: $400.00
Total:	**S$** 2115.23	**Global Sum S$:** 2100.00	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 2100.00	Name 1:	1ST AUTOWORKS PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	