15/5/2010

INS. CASE OWNER: Norsiah

CC4/AIG20006658/Kda3

LKK:

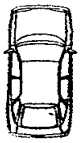
IDAC:

ASSIGNMENT

Surveyor: KENNETH DOI: 29/06/2020 Date / Time : 25/06/2020

Registered in Merimen: 25/06/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SBY 981M

Name of Insured : ANDREW LIM TIONG HENG

Insured Tel No. : HP: 96820270

Excess Sec II :S$ D.O.A : 23/06/2020

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

Claim No. : 4662150327SG

Policy No. : 2100349134

Make / Model : TOYOTA WISH-1.8 (A)

Place of Accident : PIE HEADING TO TUAS BEFORE EXIT CLEMENTI ROAD

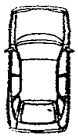
If **NO**, Driver Name / Age :

Driver Tel No. : (V/L: YES / NO)

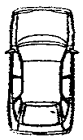
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % **Final ? Yes / No**

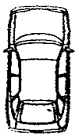
SKK 598D → ____ → ____ → ____



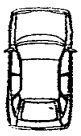
INSRS:
WSP: MBM WHEELPOWER
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SKK 598D - CC4/CTI17012653/R1pb3n2 ; 24/06/2017
	SBY 981M - NA/INC11017879/j1 ; 02/09/2011
	CC6/AIG11018048/Ujr1q2 ; 02/09/2011

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$ 3,450.00 (5 days) Reduction: 88 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 17/08/2020 Confirm with Ivy Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 100%
Repair Cost: (w/GST)	S$ 3,691.50	3 veh C.C, OI was last
Loss of Rental (LOR):	S$ 963.00 (6 days) X $150 (w/GST)	
Loss of Use (LOU):	S$ - ($ x days)	
Loss of Income (LOI):	S$ - ($ x days)	
LOR only ✓ LOU only ☐	LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]	
GIA/LTA Search	S$ 31.00	
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: $320
Total:	**S$ 4,685.50** **Global Sum S$:**	

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

Payee 1:	S$ 4,685.50	Name 1:	MBM Wheelpower Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	