15/5/2010

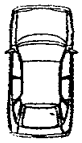
INS. CASE OWNER: CHAN Kian Chuan | CC4/ASM20006695/Kba3 | LKK: IDAC: 172515

ASSIGNMENT

Surveyor: _____ DOI: _____ Date / Time : 25/06/2020

Registered in Merimen: _____

Pre-assign / CCU / FTE



Insured Vehicle No. : SLV 3423K | Claim No. : S0M02PLB

Name of Insured : CHER WILLIE | Policy No. : _____

Insured Tel No. : _____ HP: 90280648 | Make / Model : PEUGEOT 3008-1.2 PURETECH (A)

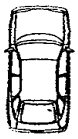
Excess Sec II :S$ _____ D.O.A : 19/06/2020 | Place of Accident : ANG MO KIO GAIN CITY CARPARK

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

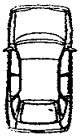
If **NO**, Driver Name / Age : | OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

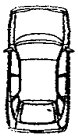
EL 818K → _____ → _____ → _____



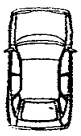
INSRS:
WSP: LOH HENG
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	EL 818K - X SLV 3423K - X	**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: ☑ ☐
09/09/2020	SETTLED AND CLOSED / NO PHY FILE	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: L/S	S$ 3,550.00 (3 days) Reduction: 45.09 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 01/09/2020 Confirm with Danny		Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 22		If NO or B 28, Ass. Lia :
Repair Cost:	S$ 3,550.00		
Loss of Rental (LOR): (W/GST)	S$ 642.00 (4 days) X $150.00		OI hit parked vehicle.
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ ($ x days)		
LOR only ☑ LOU only ☐	LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]		
GIA/LTA Search	S$ 7.00		
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: $350.00
Total:	**S$** 4,199.00	**Global Sum S$:** 3,700.00	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 3,700.00	Name 1:	LOH HENG
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	