15/5/2010

INS. CASE OWNER:

CC3/FCI20006849/Kes3

LKK:

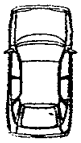
IDAC:

ASSIGNMENT

Surveyor: KENNETH DOI: 30/06/2020 Date / Time : 30/06/2020

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 7092C Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

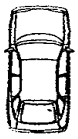
Excess Sec II :S$ D.O.A : 26/06/2020 Place of Accident :

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

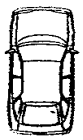
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

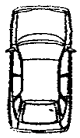
SHD 214J → → →



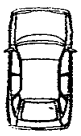
INSRS:
WSP: TRANS CAB
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SHD 214J - CC3/AIG10007839/Djf2n ; 18/04/2010
	CC3/AXA13006557/Krb3c3 ; 02/04/2013
	CC3/FCI14013212/Ktbu2 ; 22/04/2014
	NA/INC09002676/w1 ; 07/02/2009
	SHC 7092C - CS/FCI12004862/Uvn ; 26/02/2012
	CS/FCI19017580/Kyd3n2 ; 02/10/2019
	CS/SMO17005497/M1qh3e2 ; 17/03/2017
	CC3/AXA12004114/H1edc1 ; 26/02/2012

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: KSC

Repair Cost: L/S S$ 2,700.00 (3 days) Reduction: 92 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 23.02.21 Confirm with WAI YIN Email ☐ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 9	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 2,889.00	OID TURN RH @ T JUNCTION HIT TP
Loss of Rental (LOR):	S$ 265.37 (3.5 days) X $75.82	
Loss of Use (LOU):	S$ - ($ x days)	
Loss of Income (LOI):	S$ 175.00 ($ 50 x 3.5 days)	
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☑ [**Tick only one**]		
GIA/LTA Search	S$ 7.49	
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: $600
Total:	**S$** 3,336.86 **Global Sum S$:**	

FINAL PAYMENT Date/Time: 23.02.21 Confirm with: WAI YIN Email ☐ Call ☐

Payee 1:	S$ 3,336.86	Name 1:	TRANS-CAB AUTO SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	