15/5/2010

INS. CASE OWNER:

# CC4/AIG20007407/Kga3

LKK:

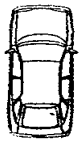
IDAC:

## ASSIGNMENT

Surveyor: KENNETH DOI: 22/07/2021 Date / Time : 17/07/2020

Registered in Merimen: 17/07/2020

**Pre-assign / CCU / FTE**



Insured Vehicle No. : SMM 8953A Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

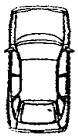
**Excess Sec II :S$** D.O.A : 11/07/2020 21:15 Place of Accident : JUNCTION @ YISHUN AVE 2

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

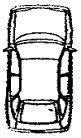
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

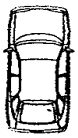
SLP 5429M →



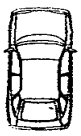
INSRS:
WSP: AH LIM
Tel : MOTOR, AMK
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

| Date/ Time | | | |
|---|---|---|---|
| | SLP 5429M - X | SMM 8953A - 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: ☐ ☐ |
| | | | 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$ 1350.00 ( 4 days) | Reduction: 1996.24 % 60 | Email ☐ Call ☐ |
| **FINAL SETTLEMENT** | Date/Time: 19/07/2021 | Confirm with MUI HONG | Email ☑ Call ☐ |
| Final Liability: | % 50 (Agreed / Assessed) | BOLA S/N No. : NIL | If NO or B 28, Ass. Lia : |
| Repair Cost: 1444.50 | S$ 722.25 | W/GST | |
| Loss of Rental (LOR): | S$ ( days) | | OI SUCCESSFULLY COUNTER CLAIM TP AT 50% |
| Loss of Use (LOU): 250.00 | S$ 125.00 ($ 50 x 5 days) | | |
| Loss of Income (LOI): | S$ ($ x days) | | |
| LOR only ☐ LOU only ☑ | LOR + LOU ☐ LOR + LOI ☐ | [**Tick only one**] | |
| GIA/LTA Search | S$ 2.00 | | |
| 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: $320.00 |
| **Total:** | **S$** 849.25 | **Global Sum S$:** | |

| | | | |
|---|---|---|---|
| **FINAL PAYMENT** | Date/Time: | Confirm with: | Email ☑ Call ☐ |
| Payee 1: | S$ 849.25 | Name 1: | AH LIM MOTOR COMPANY |
| Payee 2: (Strike if N.A.) | S$ | Name 2: | |
| Payee 3: (Strike if N.A.) | S$ | Name 3: | |