

INS. CASE OWNER:

CC 6 /AIG 2000 8288 / Ggs3

LKK:

IDAC:

ASSIGNMENT

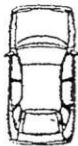
Surveyor: XGQ

DOI: 12/08/2020

Date / Time : 12/08/2020

Registered in Merimen: 12/08/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : GBG 1067R

Claim No. :

Name of Insured : WOODPECKERS-CARPENTRY PTE LTD

Policy No. :

Insured Tel No. : HP:

Make / Model :

Excess Sec II :S\$

D.O.A : 06/08/2020

Place of Accident :

Is driver the owner? (YES / ☒ NO)

Nature of Accident :

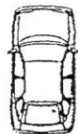
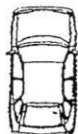
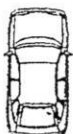
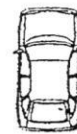
If NO, Driver Name / Age :

Driver Tel No. :

(V/L: ☒ YES / NO)OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NO

Insured Liability : % Final ? Yes / No

SMH 7086K

INSRS:
WSP: INDECO
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time

SMH 7086K : X ; GBG 1067R : 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: P/P S\$ 8,055.85 (6 days) Reduction: 1901.75 % 19

Email ☒ Call ☐

FINAL SETTLEMENT

Date/Time: 22/06/2021

Confirm with KANA

Email ☒ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 28

If NO or B 28, Ass. Lia : 0%

Repair Cost: S\$ 8,619.76

Loss of Rental (LOR): S\$ (days)

Loss of Use (LOU): S\$ 480.00 (\$ 80 x 6 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\$

Disbursement: S\$ (e.g. Tow/ Independent)

Legal Cost S\$

Total: S\$ 9,101.76

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☒ Call ☐

Payee 1: S\$ 9,101.76

Name 1: INDECO ENGINEERS PTE LTD

Payee 2: (Strike if N.A.) S\$

Name 2:

Payee 3: (Strike if N.A.) S\$

Name 3:

1) Claim status: ☒ Normal/Reject/Private Settle

2) Report Format: TP

3) Survey fee: \$320.00