15/5/2010

INS. CASE OWNER:

CC6/AIG20009037/Aga3

LKK:

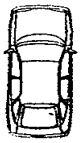
IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 25/08/2020 Date / Time : 25/08/2020

Registered in Merimen: 26/08/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SLN 1854E Claim No. :

Name of Insured : ISA RAFIQ MOHAMED S/O ABDUL KHADER Policy No. : 2100508434

Insured Tel No. : HP: Make / Model : AUDI A6 1.8 TFSI S TRONIC

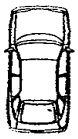
Excess Sec II :S$ D.O.A : 20/08/2020 10:00 Place of Accident : EUNOS ROAD

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

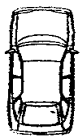
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

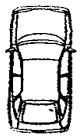
SBT 899U → → →



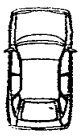
INSRS:
WSP: 1ST
Tel : AUTOWORKS
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SBT 899U - X	**STAGE** **DATE / PIC**
	SLN 1854E - CC3/AIG20009034/Ayf3 ; 20.08.2020	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$ 1700.00 (2 days) Reduction: $4387.13 % 72		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 21/04/2021	Confirm with SUHAIMI	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 1,819.00	W/GST	
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 100.00 ($ 50 x 2 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: $320.00
Total:	**S$** 1,921.00	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 1,921.00	Name 1:	1ST AUTOWORKS PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	