15/5/2010

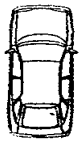
INS. CASE OWNER: ~~MERINA CHIA~~ ERIC WOO | ~~CC4/FCI20009309/da3~~ | LKK: IDAC:

ASSIGNMENT CC4/FCI20009309/Kga3q2

Surveyor: KENNETH DOI: 02/09/2020 Date / Time : 01.09.2020

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : SHB 3255G | Claim No. : D20003449MFSH

Name of Insured : CITYCAB PTE LTD | Policy No. : D-20094921MFSH

Insured Tel No. : HP: | Make / Model : TOYOTA PRIUS TAXI-1.8 (A)

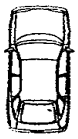
Excess Sec II :S$ D.O.A : 26/08/2020 14:30 | Place of Accident : JUNCTION JALAN IRRAWADDY AND SINARAN DRIVE

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

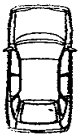
If **NO**, Driver Name / Age : WONG BOON YAIM | OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

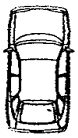
SLW 9608A → → →



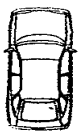
INSRS:
WSP: K KIM HIN AUTO PTE LTD
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SLW 9608A - X	**STAGE**	**DATE / PIC**
	SHB 3255G - CS/FCI17001814/H1qbn2 ; 24/01/2017	Non-Reporting ltr (1st):	
	CS/FCI17008159/M1qh3m2 ; 17/04/2017	Non-Reporting ltr (2nd):	
	CS/SMO19020270/Esf3n2 ; 13/11/2019	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 :	☐ ☐
	CLAIMANT - GENE CHOW SOON HEE	Medical Bill:	☐ ☐
		PIR:	☐ ☐
	TPV: KIA CERATO - 1591cc	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$ $3,931.38 (4 days) Reduction: 2288.80 % 37		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 08/06/2022	Confirm with MARGARET	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :
Repair Cost:	S$ 4,206.58 W/GST		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 180.00 ($ 60 x 3 days)		
Loss of Income (LOI):	S$ ($ x days)		
LOR only ☐ LOU only ☑ LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]			
GIA/LTA Search	S$ 7.45		
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: $350.00
Total:	**S$** 4,394.03	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:		Email ☑ Call ☐
Payee 1:	S$ 4,394.03	Name 1:	K.KIM HIN AUTO PTE LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:		
Payee 3: (Strike if N.A.)	S$	Name 3:		