CC4/AIG20009548/Kga3

LKK:

INS. CASE OWNER:

IDAC:

ASSIGNMENT

Surveyor: **KENNETH**   DOI: 08/09/2020   Date / Time : 07/09/2020

Registered in Merimen: 07/09/2020

Pre-assign / CCU / FTE

Insured Vehicle No. : **SML 9100T**	Claim No. :
Name of Insured :	Policy No. :
Insured Tel No. : HP:	Make / Model :

Excess Sec II :S$ D.O.A : **04/09/2020 08:45** Place of Accident :

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

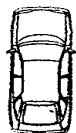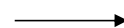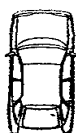If **NO**, Driver Name / Age :   OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

SLV 307H ⟶   **SML 9100T** ⟶   **SML 3892E** ⟶ _____

SLV 307H	SML 9100T	SML 3892E	
INSRS:	INSRS:	INSRS:	INSRS:
WSP:	WSP:	WSP: **S & H**	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS: **OI**	RMKS: **TP**	RMKS:

Date/ Time	SML 3892E - X	SML 9100T - 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:		☐
Post-Repair Photos:	☐	☐
Others:	☐	☐

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION   Date/Time: Confirm with: Confirm by:

Repair Cost: **L/S** S$ 3600.00 (5 days) Reduction: 1492.52 % 29   Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 31/12/2020 Confirm with: **MS WONG**   Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0%
Repair Cost:	S$ 3852.00 W/GST	
Loss of Rental (LOR):	S$ 800.00 (8 days) x $100.00	C.C (OI 2ND)
Loss of Use (LOU):	S$ ($ x days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only ☑ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]		
GIA/LTA Search	S$	
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: $320.00
Total:	S$ 4652.00 **Global Sum S$:**	

FINAL PAYMENT Date/Time: Confirm with: Email ☑ Call ☐

Payee 1:	S$ 4652.00	Name 1: **S & H MOTOR PTE LTD**
Payee 2: (Strike if N.A.)	S$	Name 2:
Payee 3: (Strike if N.A.)	S$	Name 3: