15/5/2010

INS. CASE OWNER: CC4 / AIG 2000 9883 / Des3

LKK:

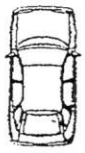
IDAC:

ASSIGNMENT

Surveyor: BRYAN DOI: 15/09/2020 Date / Time : 15/09/2020

Registered in Merimen: 15/09/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SMS 4637H Claim No. :

Name of Insured : PAN KAIXUAN Policy No. :

Insured Tel No. : HP: Make / Model :

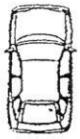
Excess Sec II :S$ D.O.A : 14/09/2020 Place of Accident :

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

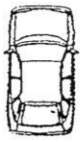
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

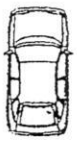
SHB 2343S → → →



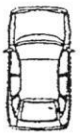
INSRS:
WSP: BIFROST
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SHB 2343S : CC3/QBE20007288/T1es3q2 ; DOA : 09/07/2020
	: CC4/FCI20007987/Ada3 DOA : 29/07/2020
	SMS 4637H : CC4/AIG20008811/ka3 ; DOA : 19/08/2020
18/09/2020	- OINR *** SENT OUT FIRST NON-REPORTING LETTER

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: ABT

Repair Cost: P/P S$ 16,051.72 (7 days) Reduction: 20 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 07.04.21 Confirm with MR YEE Email ☐ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 31a If NO or B 28, Ass. Lia :

OID MAKE A RIGHT TURN INTO MAIN ROAD HIT TP

Repair Cost: w/GST S$ 17,175.34

Loss of Rental (LOR): S$ 1,126.71 (9 days) x $125.19

Loss of Use (LOU): S$ - ($ x days)

Loss of Income (LOI): S$ 450.00 ($ 50 x 9 days)

LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☑ [Tick only one]

GIA/LTA Search S$ 7.49

Medical: S$ -

Disbursement: S$ 80.00 (e.g. Tow/ Independent)

Legal Cost S$ -

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

2) Report Format: TP

3) Survey fee: $320

Total: S$ 18,839.54 **Global Sum S$:**

FINAL PAYMENT Date/Time: 07.04.21 Confirm with: MR YEE Email ☐ Call ☐

Payee 1:	S$ 18,839.54	Name 1:	BIFROST AUTO PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	