15/5/2010

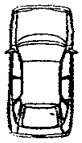
INS. CASE OWNER: Goh, Jeremy | CC4/AIG20010392/Gga3 | LKK: IDAC:

ASSIGNMENT

Surveyor: XING GUO QIANG DOI: 29/09/2020 Date / Time : 28/09/2020

Registered in Merimen: 28/09/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SML 6403P | Claim No. : 8049442113SG

Name of Insured : | Policy No. :

Insured Tel No. : HP: | Make / Model :

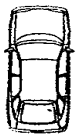
Excess Sec II :S$ D.O.A : 23.09.2020 | Place of Accident : JUNCTION OF MARYMOUNT RD & SIN MING AVE

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

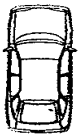
If **NO**, Driver Name / Age : | OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

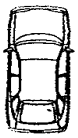
SLP 932J → | → | →



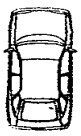
INSRS:
WSP: CHEW GOON
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SLP 932J - X	SML 6403P - X	
	CLAIMANT - LIU MINGWEI		
	TPV:RENAULT KADJAR - 1197cc		

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: P/P S$ $3,697.50 (5 days) Reduction: $3,550.50 % 49 Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 25/05/2022 Confirm with KELLY Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 3,956.33 W/GST	
Loss of Rental (LOR):	S$ 535.00 (5 days) x $107 W/GST	(OI GOING STRIAGHT ON A RIGHT TURN ONLY LANE, TP TURNING RIGHT ON THE RIGHT AND STRAIGHT LANE)
Loss of Use (LOU):	S$ ($ x days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only ☑ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]		
GIA/LTA Search	S$ 16.00	
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: $320.00
Total:	**S$** 4,507.33 **Global Sum S$:** 4,500.00	

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

Payee 1:	S$ 4,500.00	Name 1:	CHEW GOON MOTOR
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	