15/5/2010

INS. CASE OWNER: CC4/AIG20011218/Kga3

LKK:

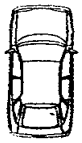
IDAC:

ASSIGNMENT

Surveyor: KENNETH DOI: 16/10/2020 Date / Time : 15/10/2020

Registered in Merimen: 16/10/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : GBH 9689M Claim No. :

Name of Insured : S & B HYDRAULIC TRADING Policy No. : 1800028371

Insured Tel No. : HP: Make / Model :

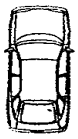
Excess Sec II :S$ D.O.A : 13/10/2020 14:45 Place of Accident : BUKIT BATOK WEST AVE 2

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

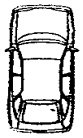
If **NO**, Driver Name / Age : NUAR SENG KWEE OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

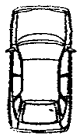
GBH 9689M → SMM 2732K → SLZ 6460L →



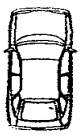
INSRS:
WSP:
Tel :
Liability :
RMKS: OI



INSRS:
WSP: K. Kim
Tel : Hin Auto
Liability :
RMKS: TP



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SMM 2732K - X GBH 9689M - X	**STAGE** **DATE / PIC**
		Non-Reporting ltr (1st):
		Non-Reporting ltr (2nd):
		Non-Reporting ltr (Final):
		Notification ltr (if non-pickup):
	TPV: HONDA JAZZ (1318cc)	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: P/P	S$ $7,873.60 (8 days) Reduction: $4,108.08 % 34		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 14/12/2021	Confirm with SANDRA	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28		If NO or B 28, Ass. Lia : 100%
Repair Cost:	S$ 8,424.75 W/GST		
Loss of Rental (LOR):	S$ (days)		C.C (OI LAST)
Loss of Use (LOU):	S$ 1,800.00 ($ 150 x 12 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: $320.00
Total:	**S$** 10,232.20	**Global Sum S$:** 10,000.00	

FINAL PAYMENT	Date/Time:	Confirm with:		Email ☑ Call ☐
Payee 1:	S$ 10,000.00	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:		