15/5/2010

INS. CASE OWNER: CC4/ASM20011268/Abs3

LKK:

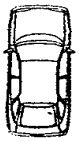
IDAC:

ASSIGNMENT

Surveyor: Adrian DOI: 19/10/2020 Date / Time : 19/10/2020

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : SCR 8318B Claim No. :

Name of Insured : LIM HANG SIANG Policy No. :

Insured Tel No. : HP: Make / Model :

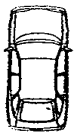
Excess Sec II :S$ D.O.A : 15/10/2020 Place of Accident :

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

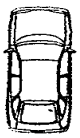
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

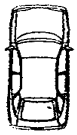
SMJ 5457B → → →



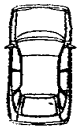
INSRS:
WSP: VISION
Tel : AUTOWORK
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SMJ 5457B : X ; SCR 8318B : X	
19/03/2021	SETTLED AND CLOSED / NO PHY FILE	

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$ 6,500.00 (7 days) Reduction: 64.73 % Email [ ] Call [ ]

FINAL SETTLEMENT Date/Time: 12/03/2021 Confirm with MICHELLE Email [✓] Cal [ ]

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 11a	If NO or B 28, Ass. Lia :
Repair Cost: (W/GST)	S$ 6,955.00	
Loss of Rental (LOR):	S$ 1,440.00 (8 days) x $180.00	
Loss of Use (LOU):	S$ ($ x days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only [✓] LOU only [ ] LOR + LOU [ ] LOR + LO [ ] [**Tick only one**]		
GIA/LTA Search	S$ 36.45	
Medical:	S$	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ 60.00 (e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$	3) Survey fee: $350.00
Total:	**S$** 8,491.45 **Global Sum S$:** 7,950.00	

FINAL PAYMENT Date/Time: Confirm with: Email [ ] Cal [ ]

Payee 1:	S$ 7,950.00	Name 1:	VISION AUTOWORK PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	