15/5/2010

INS. CASE OWNER: CC3/AIG20012274/Qra3

LKK:

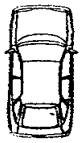
IDAC:

ASSIGNMENT

Surveyor: OI SUN PIN DOI: 06/11/2020 Date / Time : 06/11/2020

Registered in Merimen: ——

Pre-assign / CCU / FTE



Insured Vehicle No. : SML 3878Y Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

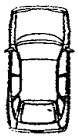
Excess Sec II :S$ D.O.A : 05/11/2020 15:00 Place of Accident : CCK ROAD BEFORE TECK WHYE ROAD

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

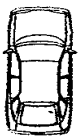
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

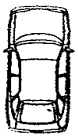
SHB 5905B → → →



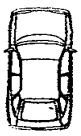
INSRS:
WSP: SMRT ,WL
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SHB 5905B - X SML 3878Y - X	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:	☐
PRELIMINARY ADVICE	Date/Time: Sent By:	Post-Repair Photos:	☐ ☐
		Others:	☐ ☐

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: P/P	S$ 1227.23 (2 days) Reduction: 75 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 25/02/2021	Confirm with LEE GEK	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 1,227.23		
Loss of Rental (LOR):	S$ 417.58 (3.5 days) x $119.31		
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ 210.00 ($ 60 x 3.5 days)		
LOR only ☐ LOU only ☐	LOR + LOU ☐ LOR + LO[redacted] [Tick only one]		
GIA/LTA Search	S$ 7.00		
Medical:	S$		1) Claim status: Normal/[redacted]
Disbursement:	S$ (e.g. Tow/ Independent)		2) Report Format: TP
Legal Cost	S$		3) Survey fee: 320.00
Total:	**S$** 1,861.81	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 1,861.81	Name 1:	SMRT TAXIS PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	