15/5/2010

INS. CASE OWNER: CC4/AIG20012660/Bga3

LKK:

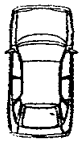
IDAC:

ASSIGNMENT

Surveyor: MR . LIM DOI: 17/11/2020 Date / Time : 17/11/2020

Registered in Merimen: 17/11/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SMG 4262T Claim No. :

Name of Insured : MR LIU TIELIANG Policy No. :

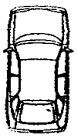
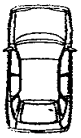
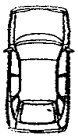
Insured Tel No. : HP: Make / Model : MAZDA 3-1.5 (A)

Excess Sec II :S$ D.O.A : 16/11/2020 14:55 Place of Accident : ALONG CTE AFTER THE TUNNEL NEAR MOULMEIN 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**

SMM 3652B →	SMG 4262T - →	SGF 7612Z →	
			
INSRS:	INSRS:	INSRS:	INSRS:
WSP:	WSP:	WSP: Team AutoPro	WSP:
Tel :	Tel :	Tel : Pte Ltd.	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS: OI	RMKS: TP	RMKS:

Date/ Time		STAGE	DATE / PIC
	SMM 3652B -X	Non-Reporting ltr (1st):	
	SMG 4262T SGF 7612Z NBA/TMI20012657/Y ; 16/11/2020	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$ 6500.00 (8 days) Reduction: $12,583.58 % 66 Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 03/02/2021 Confirm with ADEL Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0%
Repair Cost:	S$ 6,955.00 W/GST	
Loss of Rental (LOR):	S$ $1348.20 (9 days) X $149.80 (W/GST)	C.C (OI 2ND)
Loss of Use (LOU):	S$ ($ x days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only ☐ LOU only ☐ LOR + LOU ☑ LOR + LOI ☐ [**Tick only one**]		
GIA/LTA Search	S$ 36.45	
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: $320.00
Total:	**S$** 8,339.65 **Global Sum S$:**	

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

Payee 1:	S$ 8,339.65	Name 1:	TEAM AUTOPRO PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	