15/5/2010

INS. CASE OWNER: CC4/III20013088/R1ba3

LKK:

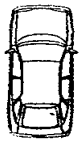
IDAC:

ASSIGNMENT

Surveyor: RASUL DOI: 26/11/2020 Date / Time : 26/11/2020

Registered in Merimen: 26/11/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 2272H Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

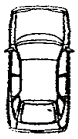
Excess Sec II :S$ D.O.A : 25/11/2020 00:25 Place of Accident : ALONG BEDOK NORTH ROAD

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

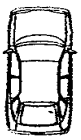
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

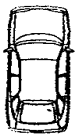
SHA 811B → → →



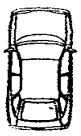
INSRS:
WSP: DING AUTOMOTIVE
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SHA 811B - CC3/AXA13010692/H1py3q2 ; 12/06/2013	
	CC3/ICS17018745/K1ea3q2 ; 26/09/2017	
	CS/FCI18012741/Avd3n2 ; 09/07/2018	
	CS3/FCI15010195/Yvbd1 ; 17/06/2015	
	NS/INC13002937/H1zu2 ; 09/02/2013	
	NS/INC18010093/K1tbn2 ; 30/05/2018	
	SHC 2272H -CC3/AIG11006183/H1a2g2q2 ; 01/04/2011	
	CC3/AXA12001521/H1ec3f1 ; 21/01/2012	
	NA/TIC11005983/w1 ; 01/04/2011	
25/03/2021	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$ 6,100.00 (6 days) Reduction: 49.64 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 24/03/2021 Confirm with KELLY Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost: (W/GST)	S$ 6,527.00	
Loss of Rental (LOR):	S$ 620.58 (6 days) x $103.43	
Loss of Use (LOU):	S$ ($ x days)	
Loss of Income (LOI):	S$ 240.00 ($ 40 x 6 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: $500.00
Total:	**S$** 7,395.03 **Global Sum S$:** 7,350.00	

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

Payee 1:	S$ 7,350.00	Name 1:	DING AUTOMOTIVE PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	