15/5/2010

INS. CASE OWNER:

CC3/AIG20014413/Kba3

LKK:

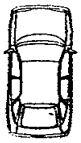
IDAC:

ASSIGNMENT

Surveyor: KENNETH DOI: 04/12/2020 Date / Time : 04/12/2020

Registered in Merimen: 23/12/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SLC 3079X Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

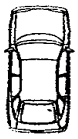
Excess Sec II :S$ D.O.A : 03/12/2020 16:35 Place of Accident : JALAN EUNOS > STILL ROAD AFTER PIE

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

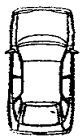
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

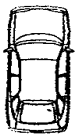
SHD 5271K → → →



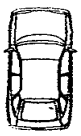
INSRS:
WSP: TRANS CAB
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SHD 5271K - CC3/AXA16003142/Kzb3q2 ; 18/02/2016	**STAGE**	**DATE / PIC**
	CC3/EQI16021495/K1zb3q2 ; 09/11/2016	Non-Reporting ltr (1st):	
	CC3/FCI16011103/Kth3n2 ; 13/06/2016	Non-Reporting ltr (2nd):	
	CC3/LPC20006044/Kba3s2 ; 27/05/2020	Non-Reporting ltr (Final):	
	SLC 3079X - X	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	☐ ☐
07/04/2021	SETTLED AND CLOSED / NO PHY FILE	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$ 1,856.08 (2 days) Reduction: 81.38 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 06/04/2021 Confirm with WAI YIN		Email ✓ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :
Repair Cost: (W/GST)	S$ 1,986.01		
Loss of Rental (LOR):	S$ 337.05 (3 days) X $112.35		
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ 150.00 ($ 50 x 3 days)		
LOR only ☐ LOU only ☐	LOR + LOU ☐ LOR + LOI ✓ [**Tick only one**]		
GIA/LTA Search	S$ 7.49		
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: $320.00
Total:	**S$** 2,480.55 **Global Sum S$:** 2,300.00		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 2,300.00	Name 1:	TRANS-CAB AUTO SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	