15/5/2010

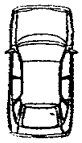
INS. CASE OWNER: ERIC WOO | CC4/FCI20014645/Ura3 | LKK: IDAC:

ASSIGNMENT

Surveyor: MARCUS DOI: 29/12/2020 Date / Time : 29/12/2020

Registered in Merimen: ——

Pre-assign / CCU / FTE



Insured Vehicle No. : SHA 8656E Claim No. : D21000019MFSH

Name of Insured : CITYCAB PTE LTD Policy No. : D-20094921MFSH

Insured Tel No. : HP: Make / Model :

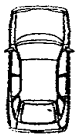
Excess Sec II :S$ D.O.A : 17/12/2020 08:35 Place of Accident : PASIR RIS DRIVE 10

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

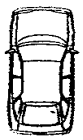
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

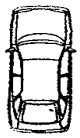
FBL 1320H → → →



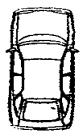
INSRS:
WSP: BAN HOCK HIN
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	FBL 1320H - NS/INC20014252/T1qf3 ; 17.12.2020	Non-Reporting ltr (1st):	
	SHA 8656E - CS/FCI19010193/R1sd3n2 ; 03/06/2019	Non-Reporting ltr (2nd):	
	NS/INC20014252/T1qf3 ; 17/12/2020	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/SUM S$ 680.00 (3 days) Reduction: 73 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 22/9/2021 Confirm with RAYMOND Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 727.60	
Loss of Rental (LOR):	S$ (days)	
Loss of Use (LOU):	S$ 60.00 ($ 20 x 3 days)	
Loss of Income (LOI):	S$ ($ x 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: 350.00
Total:	**S$** 795.05 **Global Sum S$:**	

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

Payee 1:	S$ 795.05	Name 1:	BAN HOCK HIN CO.PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	