15/5/2010

INS. CASE OWNER:

CC4/AIG20014689/Eba3

LKK:

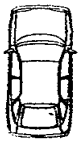
IDAC:

ASSIGNMENT

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

Registered in Merimen: 29/12/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SKX 497T Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

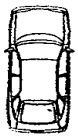
Excess Sec II :S$ D.O.A : 28/12/2020 18:05 Place of Accident : 587 BUKIT TIMAH ROAD

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

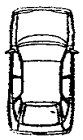
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

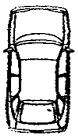
SLZ 1928M → → →



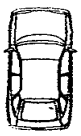
INSRS:
WSP: C&C AUTOMOTIVE
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SLZ 1928M - X	
	SKX 497T - CC3/AIG16003403/H1ua3q2 ; 19/02/2016	
	CS3/AIG17005881/Sgbs2-1 ; 06/03/2017	
	CS3/AIG17005881/Sh3s2 ; 06/03/2017	
	NA/INC17004590/s4 ; 06/03/2017	
30/06/2021	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: P/P	S$ 4,686.55 (5 days)	Reduction: 23.43 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 28/06/2021	Confirm with AI TING	Email ✓ Call ☐	
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 15	If NO or B 28, Ass. Lia :	
Repair Cost: (W/GST)	S$ 5,014.61			
Loss of Rental (LOR): (W/GST)	S$ 749.00 (7 days)	X $100.00		
Loss of Use (LOU):	S$ ($ x days)			
Loss of Income (LOI):	S$ ($ x days)			
LOR only ✓ LOU only ☐	LOR + LOU ☐	LOR + LOI ☐ [**Tick only one**]		
GIA/LTA Search	S$			
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:	$320.00
Total:	**S$** 5,763.61	**Global Sum S$:**		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐	
Payee 1:	S$ 5,763.61	Name 1: Cycle & Carriage Automotive Pte Ltd		
Payee 2: (Strike if N.A.)	S$	Name 2:		
Payee 3: (Strike if N.A.)	S$	Name 3:		