15/5/2010

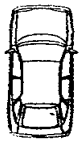
INS. CASE OWNER: ERIC WOO | CC4/FCI20014767/T1ra3 | LKK: IDAC:

ASSIGNMENT

Surveyor: TAUFIKH DOI: 05/01/2021 Date / Time : 30/12/2020

Registered in Merimen: ——

Pre-assign / CCU / FTE



Insured Vehicle No. : SHA 9594T Claim No. : D21000052MFSH

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

Insured Tel No. : HP: Make / Model : HYUNDAI I40

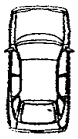
Excess Sec II :S$ D.O.A : 29/12/2020 08:20 Place of Accident : Farrer Rd, Singapore

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

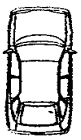
If **NO**, Driver Name / Age : GAN KIAN KHOON OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

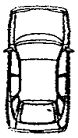
SJY 558H → → →



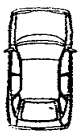
INSRS:
WSP: PERFORMANCE MOTOR LTD
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SJY 558H - NA/INC19014065/z4 ; 09.08.2019	**STAGE** **DATE / PIC**
	SHA 9594T - NS/INC17011512/H1qh3e2 ; 10.06.2017	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:
PRELIMINARY ADVICE Date/Time:	Sent By:	Post-Repair Photos:
		Others:

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: P/P	S$ 6,250.05 (5 days) Reduction: 54 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 20/5/2021 Confirm with EVELYN		Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :
Repair Cost:	S$ 6,687.55		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 480.00 ($80 x 6 days)		
Loss of Income (LOI):	S$ ($ 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: 500.00
Total:	**S$** 7,167.55	**Global Sum S$:**	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 7,167.55	Name 1: PERFORMANCE MOTORS LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	