15/5/2010

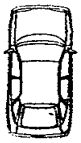
INS. CASE OWNER: MING YAO LEE | CC4/AIG20014817/Tga3 | LKK: IDAC:

ASSIGNMENT

Surveyor: MTH DOI: 04/01/2021 Date / Time : 30.12.2020

Registered in Merimen: 31.12.2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SLC 4760E Claim No. : 6419241994SG

Name of Insured : KHOO SHIN CHIAN Policy No. : 2100465393

Insured Tel No. : HP: Make / Model : Kia k3

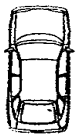
Excess Sec II :S$ D.O.A : 27/12/2020 11:40 Place of Accident : TAMPINES ST 83 OPEN CARPARK

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

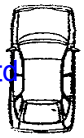
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

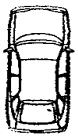
SFP 2040R → → →



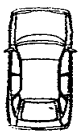
INSRS:
WSP: AP Automotive Services Pte Ltd
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SFP 2040R - CC7/AIG13014401/Cb3w2 ; 04.08.2013	**STAGE** **DATE / PIC**
	SLC 4760E - X	Non-Reporting ltr (1st):
		Non-Reporting ltr (2nd):
		Non-Reporting ltr (Final):
		Notification ltr (if non-pickup):
	TPV: MITSUBISHI EVO 10 - 1998cc	Call OI:
		After call ltr to OI:
	CLAIMANT - VIKNESH S/O THEVENTHRAN	**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: L/S	S$ $17,150.00 (10 days)	Reduction: $16,350.00 % 49	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 03/08/2022	Confirm with JULIANA	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 24	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 18,350.50 W/GST		
Loss of Rental (LOR):	S$ 1,605.00 (10 days)	x $160.50 W/GST	
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ ($ x days)		
LOR only ☑ LOU only ☐	LOR + LOU ☐	LOR + LOI ☐ [**Tick only one**]	
GIA/LTA Search	S$ 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: $320.00
Total:	**S$** 19,962.95	**Global Sum S$:** 19,900.00	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 19,900.00	Name 1:	AP AUTOMOTIVE SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	