15/5/2010

INS. CASE OWNER:

CC4/AIG21000206/Bga3

LKK:

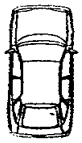
IDAC:

ASSIGNMENT

Surveyor: MR .LIM DOI: 06/01/2021 Date / Time : 05/01/2021

Registered in Merimen: 06/01/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : SMR 526B Claim No. :

Name of Insured : CHANG SER SAN Policy No. :

Insured Tel No. : HP: Make / Model :

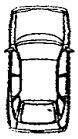
Excess Sec II :S$ D.O.A : 05/01/2021 09:45 Place of Accident : JUNCTION AMK AVE 1 & 6

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

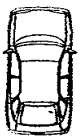
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

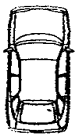
GBK 4403M → → →



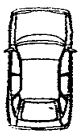
INSRS:
WSP: TEAM AUTOPRO
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	GBK 4403M - X	Non-Reporting ltr (1st):	
	SMR 526B - CS/AIG21000152/Eqd3 ; 05/01/2021	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 :	
	CLAIMANT - KIAN ANN ENTERPRISE PTE LTD	Medical Bill:	
		PIR:	
	TPV: MIT CANTER - 2998cc	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$ 6,300.00 (6 days)	Reduction: $15,119.75 % 71	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 05/08/2022	Confirm with ADEL	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 5	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 6,741.00	W/GST	
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 900.00 ($ 100 x 9 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: $320.00
Total:	**S$** 7,648.45	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 7,648.45	Name 1:	TEAM AUTOPRO PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	