15/5/2010

INS. CASE OWNER:

~~CC4/AIG21000212/pa3~~

LKK:

IDAC:

ASSIGNMENT CC4/AIG21000212/Apa3

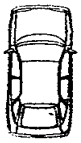
Surveyor: Adrian

DOI: 06/01/2021

Date / Time : 05/01/2021

Registered in Merimen: 06/01/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : SMK 897S

Name of Insured : EE CHIN BENG MARTIN

Insured Tel No. : HP:

Excess Sec II :S$

Is driver the owner? (YES / NO)

Claim No. :

Policy No. : 1900081171

Make / Model : Mitsubishi Outlander

D.O.A : 04/01/2021 17:05

Place of Accident : LOWER DELTA ROAD

Nature of Accident :

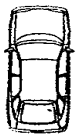
If **NO**, Driver Name / Age :

Driver Tel No. : (V/L: YES / NO)

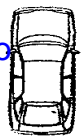
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % **Final ? Yes / No**

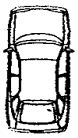
SML 8600Z → → →



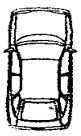
INSRS:
WSP: SmartOne Auto Pte. Ltd.
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SML 8600Z - NBA/AIG20013170/Y ; 01.12.2020	
	SMK 897S - NBA/AIG21000156/Y ; 04/01/2021	
13/04/2021	Pls refer to VIEWS for details.	

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: L/sum S$ 4,900.00 (6 days) Reduction: 67 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 13/04/2021 Confirm with Michelle Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 4,900.00	
Loss of Rental (LOR):	S$ 600.00 (6 days) x $100	
Loss of Use (LOU):	S$ ($ 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: $320.00
Total:	**S$** 5,507.45 **Global Sum S$:** 5,500.00	

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

Payee 1:	S$ 5,500.00	Name 1:	Smartone Auto Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	