15/5/2010

INS. CASE OWNER:

CC4/CTI21001852/Dea3q2

LKK:

IDAC:

ASSIGNMENT

Surveyor: BRYAN DOI: 16/02/2021 Date / Time : 08/02/2021

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : YP 8351D Claim No. : SNM21D200759/C02/YP8351D/TANKL

Name of Insured : MONZONE AIR-CONDITIONINF PTE LTD Policy No. : DMCVSNA00090332000

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 05/02/2021 Place of Accident :

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**

SHA 3646S → → →

INSRS:	INSRS:	INSRS:	INSRS:
WSP: BIFROST	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time

SHA 3646S : CS3/FCI15008726/Fqbk3 ; DOA : 23/05/2015

YP 8351D : X

- Please check / verify OID DL

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: ABT

Repair Cost: P/P S$ 10,451.04 (7 days) Reduction: 57 % Email Call

FINAL SETTLEMENT Date/Time: 22.03.22 Confirm with MR YEE Email Cal

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 11,182.61	OID MAKE A RH TURN FROM THE OUTER LANE W/O SIGNAL
Loss of Rental (LOR):	S$ 1,627.47 (13 days) x $125.19	
Loss of Use (LOU):	S$ - ($ x days)	
Loss of Income (LOI):	S$ 650.00 ($ 50 x 13 days)	
LOR only LOU only LOR + LOU LOR + LO ✓ [**Tick only one**]		
GIA/LTA Search	S$ 7.45	
Medical:	S$ -	1) Claim status: Normal/~~Reject/Private Settle~~
Disbursement:	S$ 80.00 (e.g. Tow/~~Independent~~)	2) Report Format: TP
Legal Cost	S$ -	3) Survey fee: $400
Total:	**S$** 13,547.53 **Global Sum S$:**	

FINAL PAYMENT Date/Time: 22.03.22 Confirm with: MR YEE Email Cal

Payee 1:	S$ 13,547.53	Name 1:	BIFROST AUTO PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	