15/5/2010

INS. CASE OWNER: ANG Yvonne 6568804461

CC4/ASM21002540/Aba3

LKK:

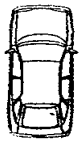
IDAC: 199647

ASSIGNMENT

Surveyor: ADRIAN DOI: 23/02/2021 Date / Time : 23/02/2021

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 5700U Claim No. : S1M033OJ

Name of Insured : TRANS-CAB SERVICES PTE LTD Policy No. : P2413997

Insured Tel No. : HP: Make / Model :

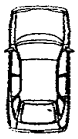
Excess Sec II :S$ 5,000.00 D.O.A : 21/02/2021 19:20 Place of Accident : Bukit Batok Road to Choa Chu Kang Way (Filter Lane)

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

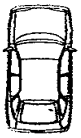
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

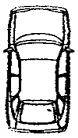
SGN 311X → → →



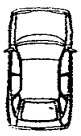
INSRS:
WSP: Xin Hua Workshop Pte Ltd
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SGN 311X - X	
	SHC 5700U - CC3/AIG12005669/Ka2r1g2 ; 17/03/2012	
	CS/FCI16021778/K1tbn2 ; 09/11/2016	
	CS3/FCI12012731/M1y1d1 ; 27/06/2012	
21/07/2021	SETTLED AND CLOSED / NO PHY FILE	

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/S S$ 5,200.00 (6 days) Reduction: 57.62 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 15/07/2021 Confirm with KERRY Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: (W/GST)	S$ 5,564.00	
Loss of Rental (LOR):	S$ 1,320.00 (11 days) X $120.00	
Loss of Use (LOU):	S$ ($ 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: $350.00
Total:	**S$** 6,891.45 **Global Sum S$:** 6,300.00	

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

Payee 1:	S$ 6,300.00	Name 1:	XIN HUA WORKSHOP PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	