15/5/2010

INS. CASE OWNER:

CC6/CTI21004878/Aea3

LKK:

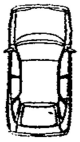
IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 16/04/2021 Date / Time : 16/04/2021

Registered in Merimen: ———

Pre-assign / CCU / FTE



Insured Vehicle No. : XE 3606Y Claim No. :

Name of Insured : Policy No. :

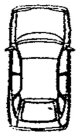
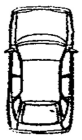
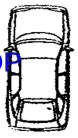
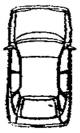
Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 13/04/2021 16:20 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**

XE 3606Y →	YN 9372Y →	SML 7571E →	
			
INSRS:	INSRS:	INSRS:	INSRS:
WSP:	WSP: XIN HUA	WSP:	WSP:
Tel :	Tel : WORKSHOP	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS: OI	RMKS: TP	RMKS:	RMKS:

Date/ Time	
	YN 9372Y - NA/TMI18003419/z4 ; 21.02.2018
	XE 3606Y - CC3/CTI19011819/K1ea3n2 ; 02/07/2019
	CC6/CTI20004110/Kea3q2 ; 14/03/2020

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: LWP
Repair Cost: L/S	S$ 25,000.00	(18 days) Reduction: 74 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 14.09.21	Confirm with HUA	Email ☐ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 100%
Repair Cost: w/GST	S$ 26,750.00	3VEH CC OID LAST	
Loss of Rental (LOR):	S$ 4,800.00	(24 days) X $200	
Loss of Use (LOU):	S$ -	($ 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$ 90.00	(e.g. Tow/~~Independent~~)	2) Report Format: TP
Legal Cost	S$ -		3) Survey fee: $400
Total:	**S$** 31,647.45	**Global Sum S$:**	
FINAL PAYMENT	Date/Time: 14.09.21	Confirm with: HUA	Email ☐ Call ☐

Payee 1:	S$ 31,647.45	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:	