15/5/2010

INS. CASE OWNER: CC6/AIG21005667/Ags3

LKK:

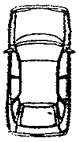
IDAC:

ASSIGNMENT

Surveyor: Adrian DOI: 07/05/2021 Date / Time : 10/05/2021

Registered in Merimen: 10/05/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : GBG 2615C Claim No. :

Name of Insured : KST AUTO RENTAL PTE. LTD. Policy No. :

Insured Tel No. : HP: Make / Model :

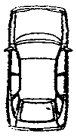
Excess Sec II :S$ D.O.A : 06/05/2021 Place of Accident : ANG MO KIO AVE 1 TWDS BISHAN

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

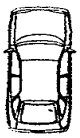
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

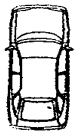
SGW 853B → → →



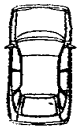
INSRS:
WSP: KANG CAR
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SGW 853B : GBG 2615C : ~~NA/AIG21005595/r3 ; DOA : 06/05/2021~~	**STAGE** **DATE / PIC**
		Non-Reporting ltr (1st):
		Non-Reporting ltr (2nd):
		Non-Reporting ltr (Final):
		Notification ltr (if non-pickup):
	TPV: TOYOTA VIOS - 1497cc	Call OI:
		After call ltr to OI:
		Documentation Check List: Handler Typist
	CLAIMANT: LIM WAI LOKE	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:
	11 REC REPAIR + 1PH + 2WEEKENDS + 1PRS = 15 DAYS	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$ $7,000.00 (11 days)	Reduction: $7,632.74 % 52	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 10/02/2022	Confirm with SHARON	Email ☑ Cal ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 100%
Repair Cost:	S$ 7,490.00	W/GST	
Loss of Rental (LOR):	S$ (days)		C.C (OI LAST)
Loss of Use (LOU):	S$ 650.00 ($ 50 x 13 days)		
Loss of Income (LOI):	S$ ☑ ($ x days)		
LOR only ☐ LOU only ☐	LOR + LOU ☐ LOR + LO ☐	[**Tick only one**]	
GIA/LTA Search	S$ 7.49		
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: $320.00
Total:	**S$** 8,147.49	**Global Sum S$:** 8,100.00	

FINAL PAYMENT	Date/Time:	Confirm with:		Email ☑ Cal ☐
Payee 1:	S$ 8,100.00	Name 1:	KANG CAR REPAIRERS PTE LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:		
Payee 3: (Strike if N.A.)	S$	Name 3:		