15/5/2010

INS. CASE OWNER:

CC4/AIG21006972/Npa3

LKK:

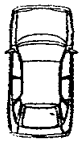
IDAC:

ASSIGNMENT

Surveyor: NAZ DOI: 23/06/2021 Date / Time : 23/06/2021

Registered in Merimen: 23/06/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : SMC 4945C Claim No. :

Name of Insured : Ace Fleet Management Pte Ltd Policy No. :

Insured Tel No. : HP: Make / Model : Kia Carens

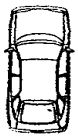
Excess Sec II :S$ D.O.A : 22/06/2021 08:17 Place of Accident : KJE towards PIE

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

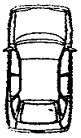
If **NO**, Driver Name / Age : Koh Soon Hock (Xu Shunfu) OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

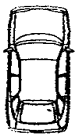
SHD 4469P → → →



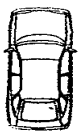
INSRS:
WSP: CDGE
Tel : LOYANG
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SHD 4469P - CC3/AIG13015875/Ysa3q2 ; 26/08/2013	**STAGE**	**DATE / PIC**
	CC4/ICS17007679/H1eb3q2 ; 17/04/2017	Non-Reporting ltr (1st):	
	CS/FCI17023546/M1vd3q2 ; 01/12/2017	Non-Reporting ltr (2nd):	
	NA/AIG19007666/z4 ; 28/04/2019	Non-Reporting ltr (Final):	
	SMC 4945C - NA/LIP20006965/h4 ; 02/07/2020	Notification ltr (if non-pickup):	
		Call OI:	
		After call ltr to OI:	
05/10/2021	Pls refer to VIEWS for details.	**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:	☐
PRELIMINARY ADVICE Date/Time:	Sent By:	Post-Repair Photos:	☐ ☐
		Others:	☐ ☐

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: P/P	S$ 5,226.52 (3 days) Reduction: 10 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 05/10/2021 Confirm with Jim		Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 5,592.38		
Loss of Rental (LOR):	S$ 517.88 (4 days) x S$129.47		
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ 200.00 ($ 50 x 4 days)		
LOR only ☐ LOU only ☐	LOR + LOU ☐ LOR + LOI ☑ [**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: $320.00
Total:	**S$** 6,317.75 **Global Sum S$:** 6,300.00		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 6,300.00	Name 1:	ComfortDelGro Engineering Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	