15/5/2010

INS. CASE OWNER:

CC6/GRB21007125/Aba3

LKK:

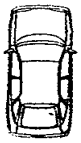
IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 29/06/2021 Date / Time : 29/06/2021

Registered in Merimen: 29/06/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : SLS 9289H Claim No. :

Name of Insured : GRAB RENTALS PTE LTD Policy No. :

Insured Tel No. : HP: Make / Model :

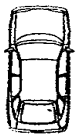
Excess Sec II :S$ D.O.A : 28.06.2021 Place of Accident :

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

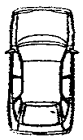
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

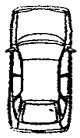
SMD 8049H → → →



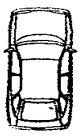
INSRS:
WSP: MG SOLUTION
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SMD 8049H - CC4/AIG20008113/T1es3 ; 05.08.2020
	SLS 9289H - CC4/GRB21002064/R1bs3q2 ; 06/02/2021
	CC4/III18001706/Uhb3q2 ; 25/01/2018

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$ 5,000.00 (6 days) Reduction: 54 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 01.09.21 Confirm with MS WONG Email ☐ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 5,350.00 OID REAR ENDED TP	
Loss of Rental (LOR):	S$ - (days)	
Loss of Use (LOU):	S$ 540.00 ($ 60 x 9 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: $500
Total:	**S$** 5,897.45 **Global Sum S$:**	

FINAL PAYMENT Date/Time: 01.09.21 Confirm with: MS WONG Email ☐ Call ☐

Payee 1:	S$ 5,897.45	Name 1:	MG SOLUTION PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	