15/5/2010

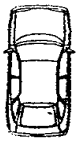
INS. CASE OWNER: CC4/AIG21007405/T1gs3 | LKK: IDAC:

ASSIGNMENT

Surveyor: Taufikh DOI: 07/07/2021 Date / Time : 07/07/2021

Registered in Merimen: 07/07/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : SLD 5743T Claim No. :

Name of Insured : HAN KOK HUAT Policy No. :

Insured Tel No. : HP: Make / Model :

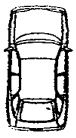
Excess Sec II :S$ D.O.A : 26/06/2021 Place of Accident : Tampines Ave 10

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

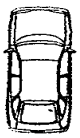
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

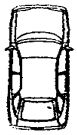
FBQ 5784A → → →



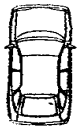
INSRS:
WSP: EROFIA
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	FBQ 5784A : NA/AIG20005537/Y ; DOA : 02/05/2020	Non-Reporting ltr (1st):	
	SLD 5743T : X	Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
	CLAIMANT - MEDUSA MOTOR	Call OI:	
		After call ltr to OI:	
		Documentation Check List:	**Handler** / **Typist**
	TPV: YAMAHA AEROX - 155cc	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: L/S	S$ 2,600.00 (5 days)	Reduction: $5,947.50 % 70	Email Call
FINAL SETTLEMENT	Date/Time: 11/04/2022	Confirm with LEELEE	Email ✓ Cal
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 2,600.00		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 140.00 ($ 20 x 7 days)		
Loss of Income (LOI):	S$ ($ x days)		
LOR only ☐ LOU only ✓	LOR + LOU ☐ LOR + LO ☐	[**Tick only one**]	
GIA/LTA Search	S$		
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: $320.00
Total:	**S$** 2,740.00	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:		Email ✓	Cal
Payee 1:	S$ 2,740.00	Name 1:	EROFIA MOTOR TRADING PTE LTD		
Payee 2: (Strike if N.A.)	S$	Name 2:			
Payee 3: (Strike if N.A.)	S$	Name 3:			