15/5/2010

INS. CASE OWNER:

CC3/CTI21007731/T1ea3

LKK:

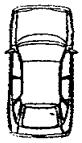
IDAC:

ASSIGNMENT

Surveyor: TAUFIKH DOI: 10/08/2021 Date / Time : 16/07/2021

Registered in Merimen: ——

Pre-assign / CCU / FTE



Insured Vehicle No. : SKF 7215P Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

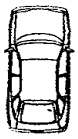
Excess Sec II :S$ D.O.A : 13.07.2021 0700 Place of Accident :

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

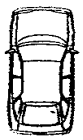
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

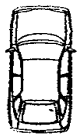
SHD 1822Y →



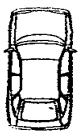
INSRS:
WSP: PREMIER
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SHD 1822Y - CC3/MSG14020297/H1qbk3 ; 27.10.2014	Non-Reporting ltr (1st):	
	SKF 7215P - CS/CTI21003508/Bvf3n2 ; 04/02/2021	Non-Reporting ltr (2nd):	
	CS/CTI21007687/Utc ; 13/07/2021	Non-Reporting ltr (Final):	
	CS/CTI21007692/Avc ; 13/07/2021	Notification ltr (if non-pickup):	
	NA/CTI21001773/h4 ; 04/02/2021	Call OI:	
	NA/CTI21002614/r3 ; 24/02/2021	After call ltr to OI:	
	NA/INC21001720/h4 ; 04/02/2021	**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: MTH
Repair Cost: P/P	S$ 967.12 (2 days)	Reduction: 68 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 05.01.22	Confirm with SHAFAWATI	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 1,034.82	PIR AGAINST OI	
Loss of Rental (LOR):	S$ 160.50 (2.5 days)	x $64.20	
Loss of Use (LOU):	S$ - ($ x days)		
Loss of Income (LOI):	S$ 125.00 ($ 50 x 2.5 days)		
LOR only ☐ LOU only ☐	LOR + LOU ☐	LOR + LOI ☑ [**Tick only one**]	
GIA/LTA Search	S$ 2.00		
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: $400
Total:	**S$** 1,322.32	**Global Sum S$:** 1,300.00	
FINAL PAYMENT	Date/Time: 05.01.22	Confirm with: SHAFAWATI	Email ☐ Call ☐

Payee 1:	S$ 1,300.00	Name 1:	PREMIER AUTOMOTIVE SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	