15/5/2010

INS. CASE OWNER:

CC4/AIG21007760/Ura3

LKK:

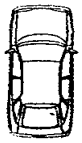
IDAC:

ASSIGNMENT

Surveyor: MARCUS DOI: 19/07/2021 Date / Time : 19/07/2021

Registered in Merimen: 19/07/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : SMY 5558P Claim No. : 2238209161SG

Name of Insured : MALIM ARAFFIZ BIN JALANI Policy No. : 7210025741

Insured Tel No. : HP: Make / Model : Mitsubishi Outlander

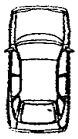
Excess Sec II :S$ D.O.A : 13/07/2021 07:30 Place of Accident : Ang Mo Kio Ave 5, Singapore

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

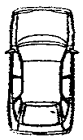
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

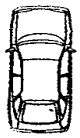
SLE 5101R → → →



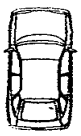
INSRS:
WSP: BlackEagle Auto Pte Ltd
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SLE 5101R - SMY 5558P - NBA/CTI21007609/T1 ; 13.07.2021	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:

Repair Cost: L/SUM S$ 1,300.00 (4 days) Reduction: 85 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 06/10/2021 Confirm with BLACK EAGLE Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 1,300.00	
Loss of Rental (LOR):	S$ 500.00 (5 days) x $100.00	
Loss of Use (LOU):	S$ ($ x 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: 320.00
Total:	**S$** 1,807.45 **Global Sum S$:**	

FINAL PAYMENT Date/Time: Confirm with: Email ☐ Call ☐

Payee 1:	S$ 1,807.45	Name 1:	BLACK EAGLE AUTO PTE. LTD.
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	