15/5/2010

INS. CASE OWNER:

CC4/AIG21008063/Tga3

LKK:

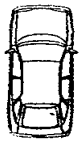
IDAC:

ASSIGNMENT

Surveyor: MTH DOI: 30/07/2021 Date / Time : 29/07/2021

Registered in Merimen: 28/07/2021

Pre-assign / CCU / FTE (replace case - Merimen)



Insured Vehicle No. : SLL 3308M Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

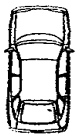
Excess Sec II :S$ D.O.A : 28/07/2021 Place of Accident : BUKIT TIMAH RD

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

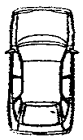
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

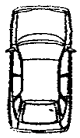
SHC 7300C → → →



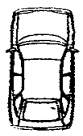
INSRS:
WSP: CDGE LOYANG
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SHC 7300C - CC3/AIG13020489/Ysa3q2; 28/10/2013	**STAGE** **DATE / PIC**
	CS3/FCI14008394/R1tbk3; 05/04/2014	Non-Reporting ltr (1st):
	SLL 3308M - X	Non-Reporting ltr (2nd):
		Non-Reporting ltr (Final):
		Notification ltr (if non-pickup):
		Call OI:
		After call ltr to OI:
	CLAIMANT - CITYCAB PTE LTD	**Documentation Check List: Handler Typist**
		Notification ltr (if non-pickup)
		After call ltr to OI:
	TPV: T.PRIUS - 1798cc	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$ 2,400.00 (3 days) Reduction: $1,471.55 % 38		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 11/04/2022	Confirm with JIM	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 2,568.00	W/GST	
Loss of Rental (LOR):	S$ 627.00 (5 days)	x $125.40	
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ 250.00 ($ 50 x 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: $320.00
Total:	**S$** 3,447.00	**Global Sum S$:** 3,400.00	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 3,400.00	Name 1:	COMFORTDELGRO ENGINEERING PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	