15/5/2010

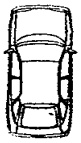
INS. CASE OWNER: LOH CHEE HENG | CC4/AIG21008685/Kea3 | LKK: IDAC:

ASSIGNMENT

Surveyor: KENNETH DOI: 18/08/2021 Date / Time : 18/08/2021

Registered in Merimen: ——

Pre-assign / CCU / FTE



Insured Vehicle No. : SLG 9075X | Claim No. : 5637330424SG

Name of Insured : Tioh Chaw | Policy No. : 1800123738

Insured Tel No. : | HP: | Make / Model : Nissan Qashqai

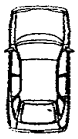
Excess Sec II :S$ | D.O.A : 14/08/2021 08:30 | Place of Accident : Serangoon Road

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

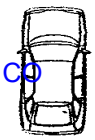
If **NO**, Driver Name / Age : | OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

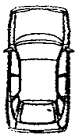
SLJ 3821H → | → | →



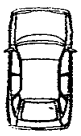
INSRS:
WSP: LIM YEW BOO SPRAY PAINT CO
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SLJ 3821H - X SLG 9075X - X	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:	☐
PRELIMINARY ADVICE	Date/Time: Sent By:	Post-Repair Photos:	☐ ☐
		Others:	☐ ☐

FINALIZATION	Date/Time:	Confirm with:	Confirm by: KSC
Repair Cost: L/S	S$ 4,100.00 (6 days)	Reduction: 43 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 25.10.21	Confirm with SERENE	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 4,100.00	OI REAR ENDED TP	
Loss of Rental (LOR):	S$ 500.00 (5 days)	X $100	
Loss of Use (LOU):	S$ - ($ x days)		
Loss of Income (LOI):	S$ - ($ x days)		
LOR only ☑ LOU only ☐	LOR + LOU ☐ LOR + LOI ☐	[**Tick only one**]	
GIA/LTA Search	S$ -		
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: $320
Total:	**S$** 4,600.00	**Global Sum S$:**	

FINAL PAYMENT	Date/Time: 25.10.21	Confirm with: SERENE	Email ☐ Call ☐
Payee 1:	S$ 4,600.00	Name 1:	LIM YEW BOO SPRAY PAINT CO
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	