15/5/2010

INS. CASE OWNER:

CC6/CTI21009572/Eea3

LKK:

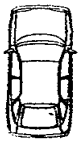
IDAC:

ASSIGNMENT

Surveyor: STEVE DOI: 13/09/2021 Date / Time : 13/09/2021

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SKR 4615A

Name of Insured :

Insured Tel No. : HP:

Excess Sec II :S$ D.O.A : 11/09/2021

Is driver the owner? (YES / NO)

If **NO**, Driver Name / Age :

Driver Tel No. : (V/L: YES / NO)

Claim No. : SNM21D205177/C02/SKR4615A/LEW

Policy No. : DMHCSNW00007182100

Make / Model :

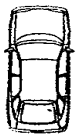
Place of Accident : ALONG AYE TOWARDS JURONG

Nature of Accident :

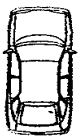
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % **Final ? Yes / No**

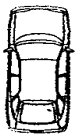
SLE 9835E → → →



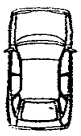
INSRS: AUTOMOTIVE REPAIR CENTRE PTE LTD
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SKR 4615A - CC6/AIG19005680/Ukb3q2 ; 30.03.2019
	SLE 9835E - NA/FWD20003384/z4 ; 29.02.2020

STAGE	DATE / PIC
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: CTY

Repair Cost: L/S S$ 8,350.00 (15 days) Reduction: 53 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 10.05.22 Confirm with SHUJUAN Email ☐ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 8,934.50	OID REAR ENDED TP
Loss of Rental (LOR): w/GST	S$ 2,033.00 (19 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$ 2.00	
Medical:	S$ 389.16	1) Claim status: Normal/~~Reject/Private Settle~~
Disbursement:	S$ - (e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$ -	3) Survey fee: $400
Total:	**S$** 11,358.66 **Global Sum S$:** 11,350.00	

FINAL PAYMENT Date/Time: 10.05.22 Confirm with: SHUJUAN Email ☐ Call ☐

Payee 1:	S$ 11,350.00	Name 1:	AUTOMOTIVE REPAIR CENTRE PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	