15/5/2010

INS. CASE OWNER: CC4/AIG21009960/Bga3

LKK:

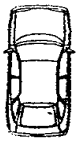
IDAC:

ASSIGNMENT

Surveyor: LTG DOI: 24/09/2021 Date / Time : 24/09/2021

Registered in Merimen: 24/09/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : SFU 3733S Claim No. : 4831657902SG

Name of Insured : KOO WENG YEW ALAN Policy No. : 1900199316

Insured Tel No. : HP: Make / Model :

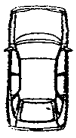
Excess Sec II :S$ D.O.A : 23/09/2021 Place of Accident : Near 50 Tampines North Drive 2

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

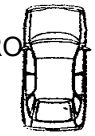
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

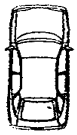
SJQ 7190E → → →



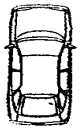
INSRS:
WSP: TEAM AUTOPRO
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SJQ 7190E : NA/CTI21009953/r3 ; DOA : 23/09/2021	**STAGE** **DATE / PIC**
	SFU 3733S : 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
	CLAIMANT - SENSE CAR RENTAL PTE. LTD.	LTA / GIA :
		Medical Bill:
	TPV: H.STREAM - 1799cc	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: LIMIT	S$ 8,600.00 (21 days)	Reduction: $38,642.71 % 82	Email Call
FINAL SETTLEMENT	Date/Time: 04/07/2022	Confirm with ADEL	Email ✓ Cal
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0%
Repair Cost:	S$ 9,202.00	W/GST	
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 2,000.00 ($ 80 x 25 days)		C.C (OI LAST 3RD)
Loss of Income (LOI):	S$ ✓ ($ x days)		
LOR only LOU only ✓	LOR + LOU LOR + LO	[**Tick only one**]	
GIA/LTA Search	S$ 65.45		
Medical:	S$		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ 180.00	(e.g. Tow / Independent)	2) Report Format: TP
Legal Cost	S$		3) Survey fee: $320.00
Total:	**S$** 11,447.45	**Global Sum S$:** 11,380.00 (AIG INSTRUCTION)	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ✓ Cal
Payee 1:	S$ 11,380.00	Name 1:	TEAM AUTOPRO PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	