15/5/2010

INS. CASE OWNER:

CC3/CTI21010680/Vra3

LKK:

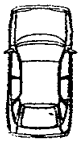
IDAC:

ASSIGNMENT

Surveyor: THEVAN DOI: 18/10/2021 Date / Time : 18/10/2021

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : GBD 4635Y Claim No. : SNM21D205940/C02/GBD4635Y/TANKW

Name of Insured : Policy No. : DMCVSNW00102662000

Insured Tel No. : HP: Make / Model :

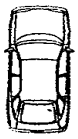
Excess Sec II :S$ D.O.A : 18/10/2021 07:35 Place of Accident :

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

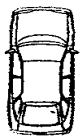
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

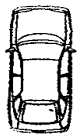
SHD 1679U → → →



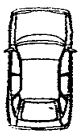
INSRS:
WSP: PREMIER
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SHD 1679U - CC3/AXA12013118/H1wdq2; 27/06/2012	**STAGE** **DATE / PIC**
	CC3/AXA13013081/M1ry3c3; 17/07/2013	Non-Reporting ltr (1st):
	GBD 4635Y - NA/CTI17022500/h4 ; 25.11.2017	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:
Repair Cost: P/P	S$ 5,523.76 (4 days) Reduction: 38 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 10/11/2022	Confirm with SHAFAWATI	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 9	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 5,910.42		
Loss of Rental (LOR):	S$ 363.80 (5 days)	x $72.76	
Loss of Use (LOU):	S$ ($ 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: 400.00
Total:	**S$** 6,526.22	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 6,526.22	Name 1:	Premier Automotive Services Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	