15/5/2010

INS. CASE OWNER: CC6/CTI21011198/Aga3

LKK:

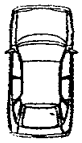
IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 29/10/2021 Date / Time : 29/10/2021

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : SGV 2223L Claim No. : SNM21D206154

Name of Insured : CHEE KOK HAN (ZHU GUOHAN) Policy No. : DMPCSNW00170182101

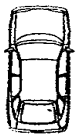
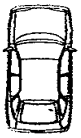
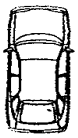
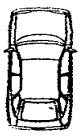
Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 27/10/2021 08:40 Place of Accident : PIE TWDS TOA PAYOH NEAR EXIT 20B

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**

SMP 5918G →	SGV 2223L →	SDU 338T →	
			
INSRS:	INSRS:	INSRS:	INSRS:
WSP:	WSP:	WSP: MG SOLUTION	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS: OI	RMKS: TP	RMKS:

Date/ Time			
	SDU 338T - X SGV 2223L - X	**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	☐ ☐
	CLAIMANT - SBG TRANSPORT	LTA / GIA :	☐ ☐
		Medical Bill:	☐ ☐
	TPV: T.PRIUS - 1798cc	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: LS	S$ $1,400.00 (3 days) Reduction: $3,205.80 % 70		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 01/06/2022 Confirm with SU		Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28		If NO or B 28, Ass. Lia : 0%
Repair Cost:	S$ 1,498.00 W/GST		
Loss of Rental (LOR):	S$ (days)		C.C (OI 2ND)
Loss of Use (LOU):	S$ 400.00 ($ 80 x 5 days)		
Loss of Income (LOI):	S$ ($ x days)		
LOR only ☐ LOU only ☑	LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]		
GIA/LTA Search	S$ 7.45		
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: $400.00
Total:	**S$** 1,905.45 **Global Sum S$:** 1,900.00		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 1,900.00	Name 1: MG SOLUTION PTE LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	