INS. CASE OWNER:	**CC6/AIG21011465/Ara3**	LKK: IDAC:

ASSIGNMENT

Surveyor: **Adrian**   DOI: 08/11/2021   Date / Time : 10/11/2021

Registered in Merimen: 10/11/2021

Pre-assign / CCU / FTE

Insured Vehicle No. : **SLA 9358L**   Claim No. : 0863753681SG

Name of Insured : **Paquette Yvon**   Policy No. :

Insured Tel No. :   HP: Make / Model :

Excess Sec II :S$ D.O.A : 03/11/2021   Place of Accident :

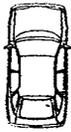Is driver the owner? (**YES** / NO)   Nature of Accident :

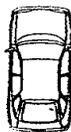If **NO**, Driver Name / Age :   OI GIA REPORT: **YES** / NO ; TP GIA REPORT: **YES** / NO

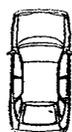Driver Tel No. :   (V/L: **YES** / NO)   Insured Liability :   %   **Final ? Yes / No**

SMD 3270S ⟶   ⟶   ⟶

INSRS: WSP: XIN HUA Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SMD 3270S : NA/AIG21011313/r3 ; DOA : 03/11/2021
	SLA 9358L :

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: LWP

Repair Cost: **L/S** S$ 2,000.00 (3 days) Reduction: 82 %   Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 09.06.22   Confirm with KERRY   Email ☐ Cal ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 24   If NO or B 28, Ass. Lia :

Repair Cost: **w/GST** S$ 2,140.00   OI EXIT FROM PARKING LOT HIT TP

Loss of Rental (LOR): S$ 400.00 (4 days) x $100

Loss of Use (LOU): S$ - ($ x days)

Loss of Income (LOI): S$ - ($ x days)

LOR only ✓   LOU only ☐   LOR + LOU ☐   LOR + LO ☐   [**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: $320

Total: S$ 2,547.45   **Global Sum S$:**

FINAL PAYMENT Date/Time: 09.06.22   Confirm with: KERRY   Email ☐ Cal ☐

Payee 1:	S$ 2,547.45	Name 1:	XIN HUA WORKSHOP PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	