15/5/2010

INS. CASE OWNER:

CC4/LPC21012053/Ega3

LKK:

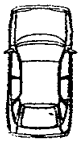
IDAC:

ASSIGNMENT

Surveyor: STEVE DOI: 08/12/2021 Date / Time : 29/11/2021

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : YP 3659A Claim No. :

Name of Insured : SK UNITED ENGRG PL Policy No. : Z21VC05007925

Insured Tel No. : HP: Make / Model :

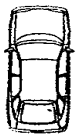
Excess Sec II :S$ D.O.A : 26/11/2021 14:54 Place of Accident : 544 Jurong West Street 42

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

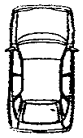
If **NO**, Driver Name / Age : GANDHI THEVAR HARIHARAN OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

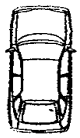
GBB 5958U → → →



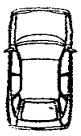
INSRS: WAH HONG MOTORS & CREDIT PTE LTD
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	YP 3659A - X	**STAGE**	**DATE / PIC**
	GBB 5958U - CS/EGI16022593/Uvbv2 ; 24.11.2016	Non-Reporting ltr (1st):	
	- CC4/LPC21009648/Vea3q2 ; 13.09.21	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 :	
	CLAIMANT - JAFFAJUICE SINGAPORE PTE LTD	Medical Bill:	
		PIR:	
	TPV: TOYOTA DYNA (2982cc)	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$ 1850.00 (3 days) Reduction: 1428.25 % 44		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 02/06/2022	Confirm with JIMMY	Email ☑ Call ☐
Final Liability:	% 50 (Agreed / Assessed)	BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: 1979.50	S$ 989.75	W/GST	
Loss of Rental (LOR):	S$ (days)		CONFLICTING VERSION
Loss of Use (LOU): 400.00	S$ 200.00 ($ 100 x 4 days)		
Loss of Income (LOI):	S$ ($ x days)		
LOR only ☐ LOU only ☑	LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]		
GIA/LTA Search	S$		
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: $400.00
Total:	**S$** 1,189.75	**Global Sum S$:**	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 1,189.75	Name 1:	WAH HONG MOTORS & CREDIT PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	