15/5/2010

INS. CASE OWNER: CC6/III21012224/ea3

LKK:

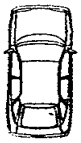
IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 01/12/2021 Date / Time : 01/12/2021

Registered in Merimen: 01/12/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : GBK 5679C Claim No. : MFL2021D0005320

Name of Insured : Policy No. : D19MFL0005549_02

Insured Tel No. : HP: Make / Model :

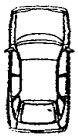
Excess Sec II :S$ D.O.A : 30.11.20211 16:15 Place of Accident :

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

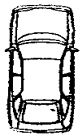
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

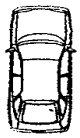
SMY 931C → → →



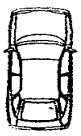
INSRS:
WSP: XIN HUA
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SMY 931C - X	**STAGE** **DATE / PIC**
	GBK 5679C - CC4/III21002393/Apa3 ; 18/02/2021	Non-Reporting ltr (1st):
	NA/INC21002404/r3 ; 18/02/2021	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$ 13,000.00 (7 days)	Reduction: 60 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 20.06.22	Confirm with KERRY	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 24	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 13,910.00	OID REVERSED	OUT OF PARKING LOT HIT TP
Loss of Rental (LOR):	S$ 1,980.00 (11 days)	x $180	
Loss of Use (LOU):	S$ - ($ x 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: $600
Total:	**S$** 15,897.45	**Global Sum S$:** 15,800.00	
FINAL PAYMENT	Date/Time: 20.06.22	Confirm with: KERRY	Email ☐ Call ☐

Payee 1:	S$ 15,800.00	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:	