15/5/2010

INS. CASE OWNER: CC4/AIG21012327/Brs3

LKK:

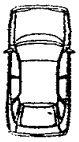
IDAC:

ASSIGNMENT

Surveyor: LTG DOI: 06/12/2021 Date / Time : 06/12/2021

Registered in Merimen: 06/12/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : SJS 717Y Claim No. :

Name of Insured : CHUA HUI CHE Policy No. :

Insured Tel No. : HP: Make / Model :

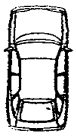
Excess Sec II :S$ D.O.A : 03/12/2021 Place of Accident :

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

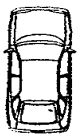
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

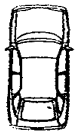
SLF 6370T → → →



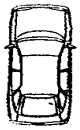
INSRS:
WSP: TEAM AUTOPRO
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SLF 6370T : X
	SJS 717Y : CS/CAI10004725/Rbr1 ; DOA : 08/03/2010

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: LTG
Repair Cost: L/S	S$ 7,850.00	(8 days)	Reduction: 63%	Email Call
FINAL SETTLEMENT	Date/Time: 05.04.22		Confirm with ADEL	Email Cal
Final Liability:	% 100	(Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 8,399.50		OI REAR ENDED TP	
Loss of Rental (LOR): w/GST	S$ 1,444.50	(9 days)	x $150	
Loss of Use (LOU):	S$ -	($ 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$ 90.00	(e.g. Tow/ Independent)		2) Report Format: TP
Legal Cost	S$ -			3) Survey fee: $320
Total:	**S$** 9,941.45	**Global Sum S$:** 9,940.00		
FINAL PAYMENT	Date/Time: 05.04.22		Confirm with: ADEL	Email Cal

Payee 1:	S$ 9,940.00	Name 1:	TEAM AUTOPRO PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	