15/5/2010

INS. CASE OWNER: CC3/III21013195/Kps3

LKK:

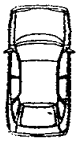
IDAC:

ASSIGNMENT

Surveyor: Kenneth DOI: 28/12/2021 Date / Time : 28/12/2021

Registered in Merimen: 28/12/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : SNB 3278U Claim No. :

Name of Insured : CRAFT LEASING PTE LTD Policy No. :

Insured Tel No. : HP: Make / Model :

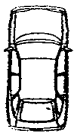
Excess Sec II :S$ D.O.A : 26/12/2021 Place of Accident :

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

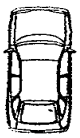
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

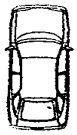
SHD 95K → → →



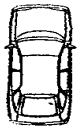
INSRS:
WSP: TRANS-CAB
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SHD 95K : CC3/AIG19019626/Kpa3q2 ; DOA : 02/11/2019
	SNB 3278U : NA/III21013162/r3 ; DOA : 26/12/2021
08/03/2022	Pls refer to VIEWS for details.

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:
Repair Cost: L/sum	S$ 6,550.00	(6 days) Reduction: 72 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 08/03/2022	Confirm with Wai Yin	Email ☑ Cal ☐
Final Liability:	% 50	(Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: 7,008.50	S$ 3,504.25	w/GST	
Loss of Rental (LOR): 405.65	S$ 202.83	(5 days) x S$81.13	
Loss of Use (LOU):	S$	($ x days)	
Loss of Income (LOI): 200	S$ 100.00	($ 40 x 5 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: $600.00
Total:	**S$** 3,814.53	**Global Sum S$:** 3,800.00	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑	Cal ☐
Payee 1:	S$ 3,800.00	Name 1:	Trans-cab Auto Services Pte Ltd	
Payee 2: (Strike if N.A.)	S$	Name 2:		
Payee 3: (Strike if N.A.)	S$	Name 3:		