15/5/2010

INS. CASE OWNER: CC4/LPC22000503/Vea3

LKK:

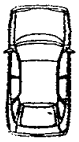
IDAC:

ASSIGNMENT

Surveyor: Thevan DOI: 20/01/2022 Date / Time : 13/01/2022

Registered in Merimen: –

Pre-assign / CCU / FTE



Insured Vehicle No. : YP 5887U Claim No. : 21/22/22/VC00/025356

Name of Insured : SHAI-KLIN Policy No. : Z/21/VC00/112460

Insured Tel No. : HP: Make / Model :

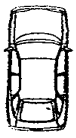
Excess Sec II :S$ D.O.A : 10/01/2022 Place of Accident : 411 BUKIT BATOK WEST AVE 4 CARPARK

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

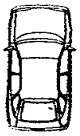
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

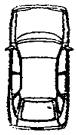
SLZ 1220X → → →



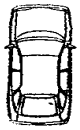
INSRS:
WSP: YONG SING
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SLZ 1220X : X
	YP 5887U : CC4/LPC21003089/Gea3q2 ; DOA : 05/03/2021

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: TTK
Repair Cost: P/P	S$ 5,003.85 (6 days)	Reduction: 49 %	Email Call
FINAL SETTLEMENT	Date/Time:	Confirm with	Email Cal
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 23	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 5,354.12		OID REVERSED AND HIT TP PARKED VEH
Loss of Rental (LOR):	S$ 900.00 (9 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$ 2.00		
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: $400
Total:	**S$** 6,256.12	**Global Sum S$:** 6,250.00	
FINAL PAYMENT	Date/Time: 27.05.22	Confirm with: KWEERU	Email Cal
Payee 1:	S$ 6,250.00	Name 1: YONG SING MOTOR WORKS	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	