15/5/2010

INS. CASE OWNER:

CC3/AIG22000678/Rga3

LKK:

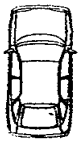
IDAC:

ASSIGNMENT

Surveyor: RASUL DOI: 18/01/2022 Date / Time : 18/01/2022

Registered in Merimen: 19/01/2022

Pre-assign / CCU / FTE



Insured Vehicle No. : SKK 1208Z Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

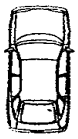
Excess Sec II :S$ D.O.A : 17/01/2022 08:50 Place of Accident : CAUSEWAY POINT DROP OFF POINT

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

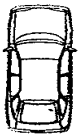
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

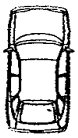
SHB 388B → → →



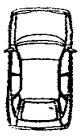
INSRS:
WSP: STRIDES
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SHB 388B - CC3/AIG16002094/K1yb3q2; 28/01/2016	**STAGE** **DATE / PIC**
	CS/TIT09023620/T1wn; 16/10/2009	Non-Reporting ltr (1st):
	NS/INC17015087/Svbe2; 03/08/2017	Non-Reporting ltr (2nd):
	NS/INC19004928/Jvd3s2; 16/03/2019	Non-Reporting ltr (Final):
	SKK 1208Z - X	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- STRIDES TAXI PTE LTD	Medical Bill:
		PIR:
	TPV: T.PRIUS - 1798cc	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: P/P	S$ $400.00 (2 days) Reduction: $3,012.52 % 88		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 20/04/2022	Confirm with LEE GEK	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 26		If NO or B 28, Ass. Lia :
Repair Cost:	S$ 400.00		
Loss of Rental (LOR):	S$ 198.00 (3 days) x $66		
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ 150.00 ($ 50 x 3 days)		
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☑ [**Tick only one**]			
GIA/LTA Search	S$ 7.00		
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: $320.00
Total:	**S$** 755.00	**Global Sum S$:** 750.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 750.00	Name 1: STRIDES TAXI PTE LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	