

INS. CASE OWNER:

CC4/LPC22000932/Rpa3

IDAC:

ASSIGNMENTSurveyor: RASULDOI: 26/01/2022Date / Time : 26/01/2022

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : YP 591EClaim No. : 21/22/22/VC05/025400

Name of Insured : _____

Policy No. : Z21VC05009456

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$D.O.A : 22/01/2022 21:55

Place of Accident : _____

Is driver the owner?

(YES / NO)

Nature of Accident : _____

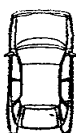
If NO, Driver Name / Age :

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. :

(V/L: YES / NO)

Insured Liability : %

Final ? Yes / NoSJV 9875ZINSRS:
WSP:
Tel :
Liability
RMKS:**My Car
Consultant
Pte Ltd**INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SJV 9875Z - CS/TP11011975/Dcg1 ; 15.06.2011	Non-Reporting ltr (1st):	
	YP 591E - CS/CTI19005163/Avd3q2 ; 19/03/2019	Non-Reporting ltr (2nd):	
	CS/CTI19005263/d3XX ; 19/03/2019	Non-Reporting ltr (Final):	
	CS/CTI19005413/Etd3e2 ; 25/04/2019	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:	☐ ☐
PRELIMINARY ADVICE	Date/Time: _____ Sent By: _____	Post-Repair Photos:	☐ ☐
		Others:	☐ ☐
FINALIZATION	Date/Time: _____ Confirm with: _____	Confirm by:	
Repair Cost: L/sum	S\$ 13,000.00 (14 days) Reduction: 66 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 27/06/2022 Confirm with Hui Qin	Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia :	0
Repair Cost: w/GST	S\$ 13,910.00		
Loss of Rental (LOR):	S\$ _____ (_____ days)		
Loss of Use (LOU):	S\$ 1,020.00 (\$ 60 x 17 days)		
Loss of Income (LOI):	S\$ _____ (\$ _____ x _____ days)		
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [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:	\$400.00
Total:	S\$ 14,932.00	Global Sum S\$: 14,900.00	
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☒ Call ☐	
Payee 1:	S\$ 14,900.00	Name 1:	My Car Consultant Pte Ltd
Payee 2: (Strike if N.A.)	S\$ _____	Name 2:	
Payee 3: (Strike if N.A.)	S\$ _____	Name 3:	