15/5/2010

INS. CASE OWNER:

CC3/CTI22001093/Kra3

LKK:

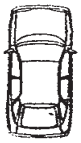
IDAC:

ASSIGNMENT

Surveyor: KENNETH DOI: 04/02/2022 Date / Time : 04/02/2022

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SMK 348K Claim No. : SNM22D200846

Name of Insured : BEN LIMOUSINE TRANSPORT SERVICES Policy No. : DMHCSNW00002672101

Insured Tel No. : HP: Make / Model :

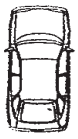
Excess Sec II :S$ D.O.A : 01.02.2022 18:00 Place of Accident : JUNCTION OF DORSET ROAD AND RANGOON ROAD

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

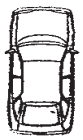
If **NO**, Driver Name / Age : NG KOK KUAN (HUANG GUO QUAN) OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

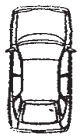
SHF 778M → → →



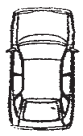
INSRS:
WSP: TRANS-CAB
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SHF 778M - CC3/III16014692/Kwb3q2 ; 04/08/2016 NBA/INC17001212/Y ; 16/01/2017	**STAGE**	**DATE / PIC**
	SMK 348K - X	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	☐ ☐
	CLAIMANT - TRANS-CAB SERVICES PTE LTD	LTA / GIA :	☐ ☐
		Medical Bill:	☐ ☐
		PIR:	☐ ☐
	TPV: RENAULT LATITUDE - 1995cc	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: LS	S$ 5150.00 (5 days) Reduction: 7486.00	% 59	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time:	Confirm with WAI YIN	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 9c		If NO or B 28, Ass. Lia :
Repair Cost:	S$ 5,510.50 W/GST		
Loss of Rental (LOR):	S$ 649.04 (8 days) x $81.13		
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ 400.00 ($ 50 x 8 days)		
LOR only ☐ LOU only ☐	LOR + LOU ☐ LOR + LOI ☑ [**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: $400.00
Total:	**S$** 6,566.99	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 6,566.99	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:	