15/5/2010

INS. CASE OWNER: CC4/LPC22001226/Kea3

LKK:

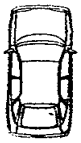
IDAC:

ASSIGNMENT

Surveyor: KENNETH DOI: 21/02/2022 Date / Time : 09/02/2022

Registered in Merimen: ——

Pre-assign / CCU / FTE



Insured Vehicle No. : SKR 5356R Claim No. : 21/22/22/VP05/025423

Name of Insured : Policy No. : Z21VP05028464

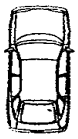
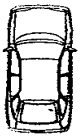
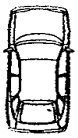
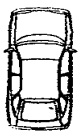
Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 29/01/2022 17:45 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**

SKR 5356R →	SME 6622K →	SLV 1596H →	
			
INSRS:	INSRS:	INSRS:	INSRS:
WSP:	WSP: Ding Auto Pte Ltd.	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS: OI	RMKS: TP	RMKS:	RMKS:

Date/ Time		STAGE	DATE / PIC
	SME 6622K - X	Non-Reporting ltr (1st):	
	SKR 5356R - CS/MSG19022070/Kvf3n2 ; 12.12.19	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:	
PRELIMINARY ADVICE	Date/Time: Sent By:	Post-Repair Photos:	
		Others:	

FINALIZATION	Date/Time:	Confirm with:	Confirm by: KSC
Repair Cost: L/S	S$ 1,900.00 (4 days)	Reduction: 70 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 28.03.22	Confirm with LYNN	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 100%
Repair Cost: w/GST	S$ 2,033.00	3VEH CC OID LAST	
Loss of Rental (LOR):	S$ - (days)		
Loss of Use (LOU):	S$ 600.00 ($100 x 6 days)		
Loss of Income (LOI):	S$ - ($ 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: $450
Total:	**S$** 2,635.00	**Global Sum S$:**	

FINAL PAYMENT	Date/Time: 28.03.22	Confirm with: LYNN	Email ☐	Call ☐
Payee 1:	S$ 2,635.00	Name 1:	DING AUTO PTE LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:		
Payee 3: (Strike if N.A.)	S$	Name 3:		