15/5/2010

INS. CASE OWNER:

CC6/CTI22002622/ea3

LKK:

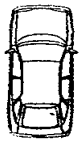
IDAC:

ASSIGNMENT

Surveyor: _____ DOI: _____ Date / Time : 22/03/2022

Registered in Merimen: _____

Pre-assign / CCU / FTE



Insured Vehicle No. : SDZ 9881E

Name of Insured : _____

Insured Tel No. : _____ HP: _____

Excess Sec II :S$ _____ D.O.A : 19/03/2022 12:40

Is driver the owner? (YES / NO)

If **NO**, Driver Name / Age :

Driver Tel No. : (V/L: YES / NO)

Claim No. : _____

Policy No. : _____

Make / Model : _____

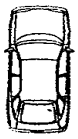
Place of Accident : CTE BEOFRE AMK AVE 1 EXIT

Nature of Accident : _____

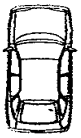
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % **Final ? Yes / No**

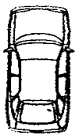
SCV 8232X → SDZ 9881E → SMJ 2510A →



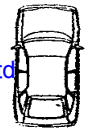
INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS: OI



INSRS:
WSP: Automotive Repair Centre Pte Ltd
Tel :
Liability :
RMKS: TP



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SMJ 2510A - X SDZ 9881E - X	

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: MRB
Repair Cost: L/S	S$ 4,000.00 (6 days)	Reduction: 74 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 12.07.22	Confirm with SHUJUAN	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$ 4,280.00	3VEH CC OI 2ND	
Loss of Rental (LOR):	S$ - (days)		
Loss of Use (LOU):	S$ 480.00 ($ 60 x 8 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: $400
Total:	**S$** 4,762.00	**Global Sum S$:**	
FINAL PAYMENT	Date/Time: 12.07.22	Confirm with: SHUJUAN	Email ☐ Call ☐

Payee 1:	S$ 4,762.00	Name 1:	AUTOMOTIVE REPAIR CENTRE PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	