15/5/2010

INS. CASE OWNER:

CC6/AIG22002689/Uga3

LKK:

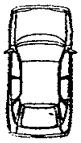
IDAC:

ASSIGNMENT

Surveyor: MARCUS DOI: 31/03/2022 Date / Time : 23/03/2022

Registered in Merimen: 23/03/2022

Pre-assign / CCU / FTE



Insured Vehicle No. : SMA 6913S Claim No. : 2871353368SG

Name of Insured : Policy No. : 1800069744

Insured Tel No. : HP: Make / Model :

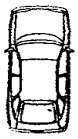
Excess Sec II :S$ D.O.A : 18/03/2022 11:30 Place of Accident : BEDOK NORTH ROAD

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

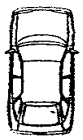
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

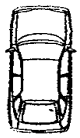
SGU 6633R → → →



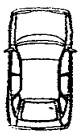
INSRS:
WSP: HOCK WAH
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SGU 6633R - X SMA 6913S - 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
	CLAIMANT - TAN BOON TAT	LTA / GIA :
		Medical Bill:
	TPV: H.STREAM - 1799cc	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~~: TOTAL LOSS	S$ 500.00 (10 days) Reduction: 3778.50 % 88		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 01/08/2022	Confirm with ANYSIA	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
~~Repair Cost~~: TOTAL LOSS	S$ 500.00		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 560.00 ($ 80 x 7 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: $320.00
Total:	**S$** 1,062.00	**Global Sum S$:**	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 1,062.00	Name 1: HOCK WAH MOTOR WORKSHOP PTE LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	