15/5/2010

INS. CASE OWNER:

CC6/AIG22004888/Uea3

LKK:

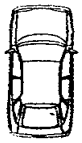
IDAC:

ASSIGNMENT

Surveyor: MARCUS DOI: 24/05/2022 Date / Time : 24/05/2022

Registered in Merimen: 24/05/2022

Pre-assign / CCU / FTE



Insured Vehicle No. : SMY 2608Z Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

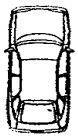
Excess Sec II :S$ D.O.A : 21/05/2022 10:50 Place of Accident : Slip Road from East Coast Park Towards Marine Flyover

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

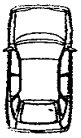
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

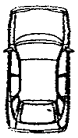
SLN 6119L → → →



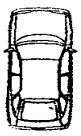
INSRS:
WSP: STYTECH
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SLN 6119L - X SMY 2608Z - 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:	☐
PRELIMINARY ADVICE Date/Time: Sent By:		Post-Repair Photos:	☐ ☐
		Others:	☐ ☐

FINALIZATION	Date/Time:	Confirm with:	Confirm by: CKS
Repair Cost: P/P	S$ 3,274.88 (4 days) Reduction: 47 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 15.09.22	Confirm with WINSTON	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 3,504.12	OID REAR ENDED TP	
Loss of Rental (LOR): w/GST	S$ 428.00 (4 days) x $100		
Loss of Use (LOU):	S$ - ($ x 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: $320
Total:	**S$** 3,934.12	**Global Sum S$:**	

FINAL PAYMENT	Date/Time: 15.09.22	Confirm with: WINSTON	Email ☐ Call ☐
Payee 1:	S$ 3,934.12	Name 1:	STYTECH AUTO PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	