15/5/2010

INS. CASE OWNER:

CC3/CTI22005969/Rpa3

LKK:

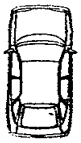
IDAC:

ASSIGNMENT

Surveyor: RASUL DOI: 20/06/2022 Date / Time : 20/06/2022

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SJS 1430S Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

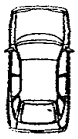
Excess Sec II :S$ D.O.A : 18/06/2022 00:15 Place of Accident :

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

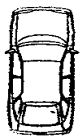
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

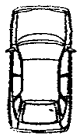
SHB 2196A → → →



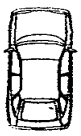
INSRS:
WSP: CDGE
Tel : LOYANG
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
SHB 2196A -	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By CC3/AIC11003360/Dbn 09/03/2011 SHB 2196A GX 4373M 18/02/2011 10/03/2011 CYY CC3/AIG17021771/M1ha3q2 20/12/2017 SHB 2196A SLH 765S 10/11/2017 21/12/2017 JMF CC3/AXA11011416/H1q1dc1 01/03/2012 SHB 2196A PA 9251M 11/06/2011 06/03/2012 NBS CC3/CTI17013450/K1hb3n2 05/12/2017 SHB 2196A SGU 3041T 29/06/2017 06/12/2017 SH CC3/TMI12019893/Dvn 22/10/2012 SHB 2196A GBC 4547Z 09/10/2012 25/10/2012 CMJ CS/QW07003776/Rv 04/12/2007 SHB 2196A 22/11/2007 11/12/2007 CYY NBA/INC15006847/e1 22/04/2015 NICHOLAS GOH YONG DE SFN 8666G SHB 2196A 22/04/2015 30/04/2015 NBS NS/INC15006947/H1qbk3 04/05/2015 SHB 2196A SFN 8666G 22/04/2015 04/05/2015 CAE NS/INC22002130/Vqcn2 28/03/2022 SHB 2196A SLF 1110K 16/02/2022 28/03/2022 FWL
SJS 1430S -	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By CS3/CTI22005880/Vqy3 21/06/2022 SKH 7067P SJS 1430S 18/06/2022 RAP NA/CTI22005826/r3 20/06/2022 TAN SOON PEOW SJS 1430S SLD 3493C 18/06/2022 REW NA/INC21003751/h4 23/03/2021 SELVASEKHARAN S/O RAMOO PA 8864B SJS 1430S 20/03/2021 09/04/2021 LSH

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:		
Authorization 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:
Repair Cost:	S$ (days)	Reduction: %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time:	Confirm with	Email ☐ Call ☐
Final Liability:	% (Agreed / Assessed)	BOLA S/N No. :	If NO or B 28, Ass. Lia :
Repair Cost:	S$		
Loss of Rental (LOR):	S$ (days)		
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$		
Medical:	S$		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$	(e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$		3) Survey fee:
Total:	**S$**	**Global Sum S$:**	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$	Name 1:	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	