15/5/2010

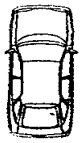
INS. CASE OWNER: ANG Yvonne | CC4/ASM22007518/Upa3 | LKK: IDAC: 275684

ASSIGNMENT

Surveyor: MARCUS DOI: Date / Time : 08/08/2022

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 5186D Claim No. : S2M048AL

Name of Insured : TRANS-CAB SERVICES PTE LTD Policy No. : P2459880

Insured Tel No. : HP: Make / Model :

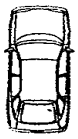
Excess Sec II :S$ D.O.A : 05/08/2022 18:45 Place of Accident : BRAS BASAH ROAD TOWARDS NICOLL HIGHWAY.

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

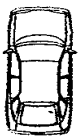
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

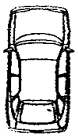
SLA 1120H → → →



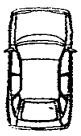
INSRS:
WSP: FASTECH
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
SLA 1120H - Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By		
NA/INC19018215/z4 16/10/2019 TANG KIM FOO SJY 8877J SLA 1120H 16/10/2019 18/10/2019 HZT		
NA/QBE19018308/h4 16/10/2019 KHOO KAY JOO SLA 1120H SJY 8877J 16/10/2019 21/10/2019 LSH		
SHC 5186D - Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By		
CC3/AXA13013332/Kv1y3c3 21/04/2014 SHC 5186D SCW 9811K 22/07/2013 22/04/2014 KYS		
CC4/LPC21005335/Kps3q2 14/07/2021 SHC 5186D SLE 3877Z 27/04/2021 19/07/2021 LSL1		

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:
Repair Cost: L/SUM	S$ 17,000.00 (10 days) Reduction: 54 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 10/05/2023	Confirm with Jason	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: 7%GST	S$18,190.00		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 720.00 ($ 60 x 12 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$ 70.00	(e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$		3) Survey fee: $350.00
Total:	**S$** 18,980.00	**Global Sum S$:**	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$18,980.00	Name 1: Fastech Auto Pte Ltd	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	