15/5/2010

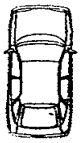
INS. CASE OWNER: ANG YVONNE | CC4/ASM22007687/Kea3 | LKK: IDAC: 276711

ASSIGNMENT

Surveyor: KENNETH DOI: 15/08/2022 Date / Time : 12/08/2022

Registered in Merimen: ——

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 372R Claim No. : S2M048RQ

Name of Insured : CITYCAB PTE LTD Policy No. : P2465703

Insured Tel No. : HP: Make / Model :

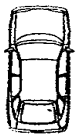
Excess Sec II :S$ D.O.A : 11/08/2022 10:25 Place of Accident :

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

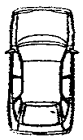
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

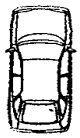
SLJ 5070U → → →



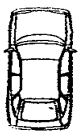
INSRS:
WSP: GUAN MOTOR
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
SLJ 5070U - X	
SHC 372R -	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By ~~CC3/AIG08020364/KDn 09/09/2008 SHC 372R SFX 3713J 15/07/2008 08/09/2008 HYN~~ ~~CC3/FCI14013837/Kqm3k3 22/07/2014 SHB 7578Z SHC 372R 22/10/2013 23/07/2014 BPL~~

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$ 1,050.00 (2 days) Reduction: 53 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 17/02/2023 Confirm with Ah Heng Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 1,050.00	
Loss of Rental (LOR):	S$ (days)	
Loss of Use (LOU):	S$ 120.00 ($ 60 x 2 days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only ☐ LOU only ☑ LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]		
GIA/LTA Search	S$ 7.45	
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: $350.00
Total:	**S$** 1,177.45 **Global Sum S$:**	

FINAL PAYMENT Date/Time: Confirm with: Email ☑ Call ☐

Payee 1:	S$ 1,177.45	Name 1:	Guan Motor Works
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	