15/5/2010

INS. CASE OWNER: CC4/GRB22007963/Tpa3

LKK:

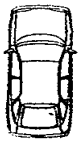
IDAC:

ASSIGNMENT

Surveyor: Taufikh DOI: 08/06/2022 Date / Time : 08/06/2022

Registered in Merimen: 07/06/2022 BY WKSP

Pre-assign / CCU / FTE



Insured Vehicle No. : SLU 2646X Claim No. :

Name of Insured : GRAB RENTALS PTE LTD Policy No. :

Insured Tel No. : HP: Make / Model :

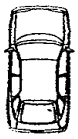
Excess Sec II :S$ D.O.A : 06/06/2022 Place of Accident :

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

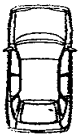
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

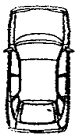
SHC 1187C → → →



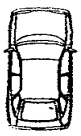
INSRS:
WSP: CDGE
Tel : LOYANG
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
SHC 1187C -	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By CC3/AIG16008818/H1ub3n2 15/08/2016 SHC 1187C SKK 4503B 10/05/2016 17/08/2016 LSP NA/INC15000021/d2 02/01/2015 NG CHIONG WONG GW 3787P SHC 1187C 19/12/2014 [illegible] NLS NS/INC14023608/H1vbu2 12/01/2015 SHC 1187C GW 3787P 19/12/2014 12/01/2015 GKO
SLU 2646X - 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:		☐
Post-Repair Photos:	☐	☐
Others:	☐	☐

PRELIMINARY ADVICE	Date/Time:	Sent By:	
FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: L/SUM	S$ 2,050.00 (2 days)	Reduction: 47 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 05/06/2023	Confirm with Kazali	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0
Repair Cost: 7%GST	S$ 2,193.50		
Loss of Rental (LOR):	S$ 438.17 (3.5 days)	x $125.19	
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ 140.00 ($40 x 3.5 days)		
LOR only ☐ LOU only ☐	LOR + LOU ☐ LOR + LOI ☑	[**Tick only one**]	
GIA/LTA Search	S$ 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: $350.00
Total:	**S$** 2,779.12	**Global Sum S$:** 2,750.00	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 2,750.00	Name 1:	ComfortDelGro Engineering Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	