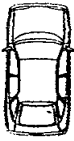


INS. CASE OWNER:

ASSIGNMENTSurveyor: **KENNETH**DOI: **21/09/2022**Date / Time : **21.09.2022**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SHD 8591S**Claim No. : **S2M04AJQ**Name of Insured : **CITYCAB PTE LTD**Policy No. : **P2465703**

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$D.O.A : **06/09/2022 15:00**Place of Accident : **Carpenter St, Singapore**

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

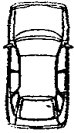
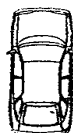
If **NO**, Driver Name / Age : **ANG CHUAK TSE**

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : _____

(V/L: YES / NO)

Insured Liability : _____ %

Final ? Yes / No**SMY 4271Y**INSRS:
WSP: **TONG LUCK**
Tel : **AUTO P/L**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
SMY 4271Y -X			
SHD 8591S -	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Reporting Date Created By		
	CC4/III20014235/R1ba3q2 15/03/2021 SHD 8591S SHD 3454M 21/12/2020 16/03/2021 HMK		
	CS3/FC16020029/Sgh3s2 11/11/2016 SKZ 455D SHD 8591S 16/10/2016 16/11/2016 GUY		
		Non-Reporting Ltr (1st):	
		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: _____	
Repair Cost: P/P	S\$ 4,164.00 (4 days) Reduction: 38 %	Email ☒ Call ☐	
FINAL SETTLEMENT	Date/Time: 28/11/2022 Confirm with Kristine	Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 9	If NO or B 28, Ass. Lia :	
Repair Cost: w/GST	S\$ 4,455.48		
Loss of Rental (LOR):	S\$ _____ (_____ days)		
Loss of Use (LOU):	S\$ 500.00 (\$ 100 x 5 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\$ 4,962.93 Global Sum S\$: 4,950.00		
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☒ Call ☐	
Payee 1:	S\$ 4,950.00 Name 1: Tong Luck Auto Pte Ltd		
Payee 2: (Strike if N.A.)	S\$ _____ Name 2: _____		
Payee 3: (Strike if N.A.)	S\$ _____ Name 3: _____		