15/5/2010

INS. CASE OWNER: CC4/LPC22010857/Upa3

LKK:

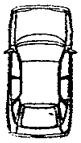
IDAC:

ASSIGNMENT

Surveyor: _____ DOI: _____ Date / Time : 01.11.2022

Registered in Merimen: _____

Pre-assign / CCU / FTE



Insured Vehicle No. : GW 2273L

Name of Insured :

Insured Tel No. : HP:

Excess Sec II :S$ D.O.A : 28.10.2022

Is driver the owner? (YES / NO)

If **NO**, Driver Name / Age :

Driver Tel No. : (V/L: YES / NO)

Claim No. : 22/22/22/VC05/026496

Policy No. :

Make / Model :

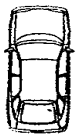
Place of Accident :

Nature of Accident :

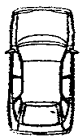
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % **Final ? Yes / No**

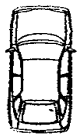
SMS 9133L → _____ → _____ → _____



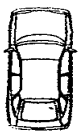
INSRS:
WSP: Super-Zee
Tel : Motor Service
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
SMS 9133L - X	
GW 2273L -	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By
	CC4/LPC22005456/Upa3q2 04/08/2022 SNB 3157K GW 2273L 06/06/2022 HMK

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$ 6,500.00 (6 days) Reduction: 48 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 13/04/2023 Confirm with ChristinA Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 6,500.00	
Loss of Rental (LOR)/ 7% GST	S$ 770.40 (6 days) X $120	
Loss of Use (LOU):	S$ ($ x days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only ☑ LOU only ☐	LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]	
GIA/LTA Search	S$ 7.45	
Medical:	S$ 110.07 Medical Fee (Driver- RACHAEL NICOLE LEAH NONIS)	1) Claim status: Normal/~~Reject/Private Settle~~
Disbursement:	S$ (e.g. Tow/ Independent)	2) Report Format: TP
~~Legal Cost~~	S$ 96.49 Medical Fee (Passenger - THALVINDERPAL SINGH SANDHU	3) Survey fee: $400.00
Total:	**S$** 7,484.41 **Global Sum S$:**	

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

Payee 1:	S$ 7,484.41	Name 1:	Super-zee Motor Service
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	