15/5/2010

INS. CASE OWNER:

CC3/AIG22011672/Tya3q2

LKK:

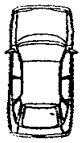
IDAC:

ASSIGNMENT

Surveyor: Taufikh DOI: 21/11/2022 Date / Time : 21.12.2022

Registered in Merimen: 21.12.2022

Pre-assign / CCU / FTE



Insured Vehicle No. : SMS 6309S Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

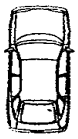
Excess Sec II :S$ D.O.A : 20/11/2022 11:35 Place of Accident :

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

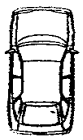
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

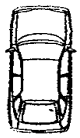
SHB 5159M → → →



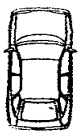
INSRS:
WSP: STRIDES
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
SHB 5159M -	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By	**DATE / PIC**
	CS/TIT08006688/T1w 22/02/2008 SHB 5159M 29/01/2008 22/02/2008 TLT	Non-Reporting ltr (1st):
	CS/TIT10017869/R1j1 08/10/2010 SHB 5159M 06/09/2010 11/10/2010 MRB	Non-Reporting ltr (2nd):
	CS1/TIT08005770/Zw 17/01/2008 SHB 5159M 30/08/2007 18/01/2008 TLT	Non-Reporting ltr (Final):
	NA/INC08018981/w1 02/07/2008 TEO TIN KIM SH 4581X SHB 5159M 02/07/2008 09/07/2008 CHH	Notification ltr (if non-pickup):
SMS 6309S - X		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: L/Sum	S$ 2,250.00 (5 days) Reduction: 82 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 22/05/2023 Confirm with Ashlene		Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 1		If NO or B 28, Ass. Lia :
Repair Cost:	S$ 2,250.00		
Loss of Rental (LOR):	S$ 704.06 (7 days) @$100.58		
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ 350.00 ($ 50 x 7 days)		
LOR only ☐ LOU only ☐	LOR + LOU ☐ LOR + LOI ☑ [**Tick only one**]		
GIA/LTA Search	S$ 2.00		
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: $320
Total:	**S$** 3,306.06	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 3,306.06	Name 1:	STRIDES TAXI PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	