15/5/2010

INS. CASE OWNER:

CC4/LPC22011791/pa3

LKK:

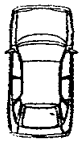
IDAC:

ASSIGNMENT

Surveyor: _____ DOI: _____ Date / Time : 23/11/2022

Registered in Merimen: _____

Pre-assign / CCU / FTE



Insured Vehicle No. : XE 3917A

Name of Insured : HUP LEE CRANE SERVICE PTE LTD

Insured Tel No. : _____ HP: _____

Excess Sec II :S$ _____ D.O.A : 19/11/2022 12:30

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

If **NO**, Driver Name / Age : SOH KENG GIAP

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

Claim No. : 22/22/22/VC05/026610

Policy No. : Z22VC05012893

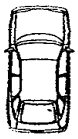
Make / Model : HINO FS1ETMA-KAS

Place of Accident : MARIAM WALK

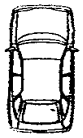
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

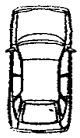
SMA 53M → _____ → _____ → _____ → _____



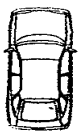
INSRS:
WSP: Performance Motors Ltd
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
SMA 53M -	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By
	CC4/AIG20003982/Kes3q2 23/06/2020 SBQ 2883S SMA 53M 11/03/2020 24/06/2020 LSL
XE 3917A -	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By
	CC4/LPC22010822/Epa3 01/11/2022 SMA 4717E XE 3917A 28/10/2022 HMK

STATUS	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: P/P	S$ 18,231.05 (7 days)	Reduction: 8 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time:05/05/2023	Confirm with CINDY	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 22	If NO or B 28, Ass. Lia :
Repair Cost: 8%GST	S$ 19,689.53		
Loss of Rental (LOR):	S$ 700.00 (7 days)	X $100	
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ ($ x days)		
LOR only ☑ LOU only ☐	LOR + LOU ☐	LOR + LOI ☐ [**Tick only one**]	
GIA/LTA Search	S$ 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: $400.00
Total:	**S$** 20,391.53	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 20,391.53	Name 1:	Performance Motors Limited
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	