15/5/2010

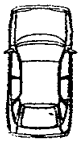
INS. CASE OWNER: LOH Cynthia | CS/ASM22008948/Upa3e2-1 | LKK: IDAC: 281743

ASSIGNMENT

Surveyor: MARCUS DOI: 12/09/2022 Date / Time : 12.09.2022

Registered in Merimen: ——

Pre-assign / CCU / FTE



Insured Vehicle No. : SJT 6553H Claim No. : S2M04ATH

Name of Insured : TOH MENG SIM Policy No. : GA589786

Insured Tel No. : HP: Make / Model :

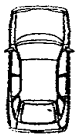
Excess Sec II :S$ D.O.A : 10/09/2022 Place of Accident :

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

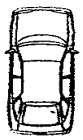
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

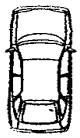
SKW 4952A → → →



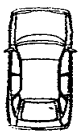
INSRS:
WSP: 2ND AUTO
Tel : PTE LTD
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
SKW 4952A -	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By		
	CS/ASM22008948/Uny3e2 30/09/2022 SKW 4952A SJT 6553H 10/09/2022 30/09/2022 RAP	Non-Reporting ltr (1st):	
SJT 6553H -	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By	Non-Reporting ltr (2nd):	
	CC4/ASM22008979/Rpa3 13/09/2022 SHD 6174B SJT 6553H 10/09/2022 RAP	Non-Reporting ltr (Final):	
	CS/ASM22008948/Uny3e2 30/09/2022 SKW 4952A SJT 6553H 10/09/2022 30/09/2022 RAP	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$ 8,400.00 (9 days)	Reduction: 69 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 29/03/2023	Confirm with MR NG	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 22	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 8,400.00		
Loss of Rental (LOR):	S$ 800.00 (8 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$ 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: $350.00
Total:	**S$** 9,207.45	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:		Email ☑ Call ☐
Payee 1:	S$ 9,207.45	Name 1:	2ND AUTO PTE LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:		
Payee 3: (Strike if N.A.)	S$	Name 3:		