15/5/2010

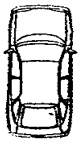
INS. CASE OWNER: LOW Garnet | CC4/ASM22012994/pa3 | LKK: IDAC: 298107

ASSIGNMENT

Surveyor: _____ DOI: _____ Date / Time : 29.12.2022

Registered in Merimen: _____

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 7112D | Claim No. : S2M04H1T

Name of Insured : CITYCAB PTE LTD | Policy No. : P2465703

Insured Tel No. : _____ HP: _____ | Make / Model : _____

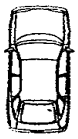
Excess Sec II :S$ _____ D.O.A : 23.12.2022 20:50 | Place of Accident : _____

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

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

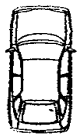
Driver Tel No. : (V/L: YES / NO) | Insured Liability : % **Final ? Yes / No**

SML 6911P → _____ → _____ → _____

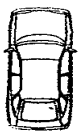


INSRS:
WSP: CHIA AUTO SERVICES PTE LTD
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
SML 6911P - X	
SHC 7112D -	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By
	CS/QW10024868/Rqg1 04/01/2011 SHC 7112D 03/12/2010 12/01/2011 SGC
	CS3/FCI15017684/Ggbc2 20/11/2015 SJW 6085B SHC 7112D 16/11/2015 23/11/2015 CCY
	NS/INC17002140/H1qh3n2 16/02/2017 SHC 7112D SGM 494G 01/02/2017 16/02/2017 LSH2

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (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$ 2,750.00 (3 days) Reduction: 64 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 08/03/2023 Confirm with Ms Wong Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: 8% GST	S$ 2,970.00	
Loss of Rental (LOR):	S$ (days)	
Loss of Use (LOU):	S$ 400.00 ($ 100 x 4 days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only ☐ LOU only ☑ LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]		
GIA/LTA Search	S$ 26.75	
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: $350.00
Total:	**S$** 3,396.75 **Global Sum S$:**	

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

Payee 1:	S$ 3,396.75	Name 1:	CHIA AUTO SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	