15/5/2010

INS. CASE OWNER: LOH Cynthia

CC4/HSB23002499/Kpa3

LKK:

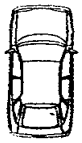
IDAC: 305559

ASSIGNMENT

Surveyor: KENNETH DOI: Date / Time : 09/03/2023

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 7345Z Claim No. : S3M04K9M

Name of Insured : CITYCAB PTE LTD Policy No. : P2478220

Insured Tel No. : HP: Make / Model :

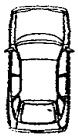
Excess Sec II :S$ D.O.A : 08/03/2023 06:40 Place of Accident : 339 Thomson Rd, Singapore 307677

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

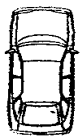
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

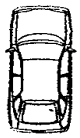
SKW 4119P →



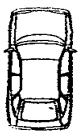
INSRS:
WSP: Thiam Heng Huat Pte Ltd
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
SKW 4119P - X	
SHC 7345Z - Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By	
CS/TMI20009720/T1sf3e2 22/09/2020 SHC 7345Z YN 8315U 10/09/2020 22/09/2020 LST1	
CS3/ECI19021549/Gqf3e2 26/12/2019 SKR 4636P SHC 7345Z 01/12/2019 26/12/2019 LST1	

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$ 4,000.00 (4 days) Reduction: 60 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 30/05/2023 Confirm with STEVEN Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 26	If NO or B 28, Ass. Lia :
Repair Cost: 8%GST	S$ 4,320.00	
Loss of Rental (LOR):	S$ 400.00 (4 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$ 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: $350.00
Total:	**S$** 4,746.75 **Global Sum S$:**	

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

Payee 1:	S$ 4,746.75	Name 1:	Thiam Heng Huat Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	