15/5/2010

INS. CASE OWNER: LOH Cynthia

CC4/ASM23003328/pa3

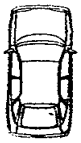
LKK: IDAC: 307601

ASSIGNMENT

Surveyor: _____ DOI: _____ Date / Time : 30.03.2023

Registered in Merimen: _____

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 7135M — Claim No. : S3M04L1W

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

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

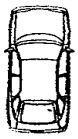
Excess Sec II :S$ _____ D.O.A : 29.03.2023 — Place of Accident : Mandai Rd, Singapore

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

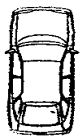
If **NO**, Driver Name / Age : — OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

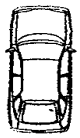
JRB 2603 → _____ → _____ → _____



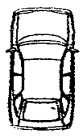
INSRS:
WSP: FASTECH
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
JRB 2603 - X	
SHC 7135M - Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By	
~~CC3/AIG09000199/Kgw 02/03/2009 SHC 7135M SJC 5498E 31/12/2008 03/03/2009 TCT~~	
~~CC3/AIG11005849/H1a2b3q2 29/08/2011 SHC 7135M SJR 9764G 30/03/2011 01/09/2011 LSL~~	
~~NS/INC10008753/Fr1 28/06/2010 SHC 7135M GR 5902L 05/05/2010 29/06/2010 TCT~~	

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$ 5,200.00 (3 days)	Reduction: 74 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 25/05/2023	Confirm with JASON	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: 8%GST	S$ 5,616.00		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 120.00 ($ 40 x 3 days)		
Loss of Income (LOI):	S$ ($ x days)		
LOR only ☐ LOU only ☑	LOR + LOU ☐ LOR + LOI ☐	[**Tick only one**]	
GIA/LTA Search	S$		
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: $350.00
Total:	**S$** 5,736.00	**Global Sum S$:** 5,730.00	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 5,730.00	Name 1:	FASTECH AUTO PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	