15/5/2010

INS. CASE OWNER:

CC6/AIG23003366/Apa3

LKK:

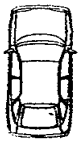
IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 16/03/2023 Date / Time : 16/03/2023

Registered in Merimen: 31/03/2023

Pre-assign / CCU / FTE



Insured Vehicle No. : SJJ 701P Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

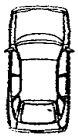
Excess Sec II :S$ D.O.A : 15/03/2023 09:30 Place of Accident :

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

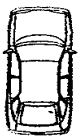
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

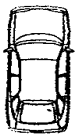
SKE 9247P → → →



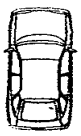
INSRS:
WSP: SM AUTOMOTIVE
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SKE 9247P - X	SJJ 701P - X	**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: ☐
PRELIMINARY ADVICE	Date/Time:	Sent By:	Post-Repair Photos: ☐ ☐
			Others: ☐ ☐

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: L/SUM	S$ 10,300.00 (12 days) Reduction: 56 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 30/06/2023 Confirm with Sukyi		Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28		If NO or B 28, Ass. Lia : 100
Repair Cost: 8%GST	S$ 11,124.00		
Loss of Rental (LOR):	S$ 500.00 (5 days) X $100		
Loss of Use (LOU):	S$ 480.00 ($ 60 x 8 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: $320.00
Total:	**S$** 12,106.00	**Global Sum S$:** 12,000.00	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 12,000.00	Name 1: SM AUTOMOTIVE	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	