15/5/2010

INS. CASE OWNER: CC 6 /CTI1701 9138 / pa3 | LKK: IDAC:

ASSIGNMENT

Surveyor: MARIUS DOI: 6-10-17 Date / Time : 5/10/17

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : GBG 4313K Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 4/10/17 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**

XD 9670B → → →

INSRS: WSP: Vfix Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	XD 9670B - X ; GBG 4313K - 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:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: S$ 4,200.00 (3 days) Reduction: 60 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 26/03/2020 Confirm with Weng Sheng Email ✓ Call ☐

Final Liability: % 80 (Agreed / Assessed) BOLA S/N No. : NIL If NO or B 28, Ass. Lia :

Repair Cost: $4494 S$ 3,595.20

Loss of Rental (LOR): S$ - (days)

Loss of Use (LOU): $450 S$ 360.00 ($150 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$ 5.35

Medical: S$ -

Disbursement: S$ - (e.g. Tow/ Independent)

Legal Cost S$ -

1) Claim status: Normal/~~Reject/Private Settle~~

2) Report Format: TP

3) Survey fee: $400

Total: **S$ 3,960.55** **Global Sum S$:** 4,000.00

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

Payee 1:	S$ 4,000.00	Name 1:	Vfix Auto Service Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	