15/5/2010 INS. CASE OWNE	R: Stavy.	CC 4, ASMISTO	5464,	Nua3 LKK: 1DAC: 36	118
Surveyor:	Ma	ASSIGN	MENT 70/2/1.8	w.	13/2018
Surveyor.	(40)		00/10/10	Date / Time :	
Pre-assign / CCU	/FTE			Registered in Merimen:	
	YN 81.	HK.		Sam ODBBZ	
Insured Vehicle No.			Claim No. : 300 VUBB		
Name of Insured	: <u></u>		Policy No.	:	
Insured Tel No.	1	HP:	Make / Model		
Excess Sec II :S\$		D.O.A: 19/03/2018	Place of Accid		
Is driver the owner		Nature of Accident :	Flace of Accid	ICIII .	
		Nature of Accident .			
If NO, Driver Name / Age : Driver Tel No.: (V/L: YES / NO.)			OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO		
(1731 1207 1107)			Insured Liability: % Final? Yes/No		
FBH 894	IK				
INSRS: WSP: Tel: Liability: RMKS:	INSRS: WSP: Tel: Liability RMKS:		INSRS: WSP: Tel: Liability: RMKS:	INSRS: WSP: Tel: Liability RMKS:	
Date/ Time	DOM SALELY A	V 85 7 V			
	PBH 8941R. X;	KN834K·X		STAGE	DATE / PIC
			2	Non-Reporting ltr (1st): Non-Reporting ltr (2nd):	
				Non-Reporting ltr (Final):	
W(c	: Beaucit And PIR			Notification ltr (if non-pickup):	
13	produced for the			Call OI: After call ltr to OI:	
My fewly Get & PM				Documentation Check List: Handler Typist	
	0			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	
RELIMINARY ADVICE	P Date/Time:	0 47		Payment Breakdown Form:	
TO THE PART OF THE	Jaco I IIIIO,	Sent By:		Post-Repair Photos:	
INALIZATION	Date/Time:	Confirm with:		Others:	
epair Cost:	S\$ (days) Reduction:	%	Confirm by:	Call F
INAL SETTLEMENT		Confirm with	70	Email Call	Call
inal Liability:	% (Agreed /	Assessed) BOLA S/N No. :		If NO or B 28, Ass. Lia:	
epair Cost:	S\$			11 110 01 D 20, 133. Dia .	
oss of Rental (LOR):	S\$ (days)		E E	
oss of Use (LOU):	S\$ (\$ x	days)			
oss of Income (LOI):	S\$ (\$ x	days)			
OR only LOU only	y LOR+LOU LO	OR + LOI [Tick only or	ne]		
ledical:	S\$			1) Claim states No. 1/D :	missata C. fut
isbursement:	S\$	(e.g. Tow/ Independ	ent)	Claim status: Normal/Reject/Private Settle Report Format:	
egal Cost	S\$	(o.g. 10 W Independ	vant j	3) Survey fee:	
otal:	SS	Global Sum S\$:			
INAL PAYMENT	Date/Time:	Confirm with:		Email Call	
ayee 1:	S\$	Name 1:		N N N	
ayee 2: (Strike if N.A.)	S\$	Name 2:	1		
Payee 3: (Strike if N.A.)	S\$	Name 3:			

· Not	<u>ASS</u>	GNMENT				
From:	Date: . 3 18	Veh No. FBH 8941 R	Yr Regn:			
Estimated Cost:		Type: M.Car (M.Cycle PBus / Van / Lorry / Taxi / Prime Mover /				
OD (TP) WS / TP RES / OD F	RES / EVA / INV / MV	Truck / Trailer or				
To Inspect Vehicle No:	BH 8941R	Make: KAWASAKI 21000 SX(ABS) c.c.				
at Workshop m/s	SG98 Motor 01-21 AMK Ind. Prk 1	Colour GREEN	A/C: Insured / Std / NI / NA			
of BIK 4001 #	01-21 AMK Ind. Prk 1	Sp.Reading 45,821	T/Radio: Insured / Std / NI / NA			
Insured:		Eng/No:				
Policy No.		C/No:				
Claims No.		Gen. Cond: Good Fair / Poor / Burnt				
Sum Insured:	Excess:	Steering Inorder / Jammed / Leaked / Burnt or				
(Client's Record)		Brake: Inorder Jammed / Leaked / Burnt or				
Make of Veh:		Modi: Nil / S/Rim / STD A/Rim or				
		Tyre Size: F: 120/7	0 R17			
(Policy Condition)		R: 190/55	R17			
Remark: The veh had commo	enced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA	MIC OHTSU / PIR / SUMI /			
repair at the time o	f inspection.	TOYO/YOKO or	METZFLER			
Bal. or Market Value:		Front	Rear			
IDAC Accident Rport:	Consistent?: Yes or No	R/Bal. 6 mm	R/Bal. 6 mm			
GIA / PR Seen:	Consistent?: Yes or No	L/Bal. mm	L/Bal. mm			
Est. Repairs:	days Res.: Yes or No	D.O.A.	D.O.I. 28/3/8			
Lum Sum:	% 3 Val.: Yes or No	Survey held at SG 98 M	OTOR			
CA / REV / REP. / 24	الالالا HRS Vehicle: IN / OUT	Des. of Damages: Frt / Rear O/S') N/S / U/C / Rooftop or				
Date: Person	Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.				
Date / Time Action / Ins	truction					
,	-					
Date/Time. File Pass to?	: Preli. Report	Days Of Repair:				
1)	: Final Report	Resurvey No. of Trip:	Survey Fee:			
Date/Time. File Return to?			Transportation:			
Add Fee		: Site Insp (\$)S+RSSI			
		: Interview (\$) Photos			
Report Format :		Tech Invs (\$) Others			
Lump Sum / I.B.I: (\$)	Weekend (\$				