15/5/2010

INS. CASE OWNER: Wilmine | CC 4, Asm 1800 7145, Swaz | LKK: IDAC: 40319

ASSIGNMENT

Surveyor: YWK | DOI: 17/04/18 | Date / Time : 17/04/2018

Registered in Merimen: –

Pre-assign / CCU / FTE

Insured Vehicle No. : SBA 3897 E | Claim No. :

Name of Insured : Neo Chin Seng | Policy No. :

Insured Tel No. : | HP: | Make / Model : BMW 530

Excess Sec II :S$ | D.O.A : 11.04.18 | Place of Accident : LUTHERAN ROAD EXIT.

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

If NO, Driver Name / Age : PHUA ANG GEK | OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : 94501249 (V/L: YES / NO) | Insured Liability : % | **Final ? Yes / No**

SMB 1343P → → →

INSRS: WSP: SMRT Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SMB1343P, X;
	SBA3897E, CC3/AIG15DB207/Rvbdl; DOA: 04/8/15

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: YWK

Repair Cost: L/S S$ 2,050.00 (3 days) Reduction: 24 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 28.01.21 Confirm with PATRICK Email ☐ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 1	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 2,050.00	OID EXIT FROM SLIP ROAD HIT TP
Loss of Rental (LOR):	S$ - (days)	
Loss of Use (LOU):	S$ 750.00 ($ 250 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$ 7.00	
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: $350
Total:	S$ 2,807.00 **Global Sum S$:**	

FINAL PAYMENT Date/Time: 28.01.21 Confirm with: PATRICK Email ☐ Call ☐

Payee 1:	S$ 2,807.00	Name 1:	SMRT BUSES LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	