15/5/2010

INS. CASE OWNER: | CC 3 /LPC1801 0815, T2 jb3 A2 | LKK: | IDAC:

ASSIGNMENT

Surveyor: Taufiek · DOI: 12/6/18 Date / Time : 12/6/18

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : SJP 7010Y		Claim No. :	18/18/18/VP15/021667
Name of Insured : ANSWAR BIN ISMAIL		Policy No. :	218 VP0501898
Insured Tel No. :	HP: 81116704	Make / Model :	Honda
Excess Sec II :S$	D.O.A : 11/6/18	Place of Accident :	Geylang Rd
Is driver the owner? (YES / NO)	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

Insured Liability : % **Final ? Yes / No**

SHB 8069U → ____ → ____ → ____

INSRS: WSP: Tel : premier Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
12/6/18	SHB 8069U / SJP 7010Y } NA/VPG18/10558/V3 NF 11/6/18
Joy	~~FINALISED~~.
7-9-18	FOR MANDATE

RECEIVED 05 DEC 2018

STAGE	**DATE / PIC**
Non-Reporting ltr (1st):	NA
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)	X	
After call ltr to OI:	X	
Authorisation To Act:	/	
Release Voucher:	/	
Final Repair Bill:	/	
Car Rental Invoice:	/	
Towing Invoice	X	
LTA / GIA :	/	
Medical Bill:	X	
PIR:	X	
Mandate/Reject Instruction:	/	
LOD		
Payment Breakdown Form:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE Date/Time: 12/6/18 Sent By: Dher

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: P/P S$ 2,334.26 4 days) Reduction: % Email Call

FINAL SETTLEMENT Date/Time: 14-11-18 Confirm with GARY Email Call

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :
Repair Cost: GST	S$ 2,497.66		
Loss of Rental (LOR):	S$ 769.58 7 days) 109.94		COPY SENT 5/12/18
Loss of Use (LOU):	S$ (S$ x days)		
Loss of Income (LOI):	S$ 280 (S$40 x 7 days)		
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]			
GIA/LTA Search	S$ 2.xx		
Medical:	S$ –		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ –	(e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$		3) Survey fee:
Total:	**S$** 3,549.24	**Global Sum S$:** 3,545	

FINAL PAYMENT Date/Time: Confirm with: Email Call

Payee 1:	S$ 3,545	Name 1: PREMIER AUTOMOTIVE SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$ X	Name 2: X
Payee 3: (Strike if N.A.)	S$	Name 3: