IPS CASE OWNER: Tan Jun Hong | CS3 / ASM1800 3047 / BV a3524 IDAC: 30883

ASSIGNMENT

Surveyor: Wilson DOI: 27/7/18 Date / Time: 14/2/18

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No.	SLU 5070L	Claim No.	S8M0087F
Name of Insured	Eng Teck Seng	Policy No.	GA2986???
Insured Tel No.	HP: 90450810	Make / Model	Honda Vezel
Excess Sec II :S$	D.O.A: 13/07/18	Place of Accident	KJE > Tuas
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

SJX 7337M → SLU 5070L → SJT 8492L → SKR 7188D → SLP6843?

INSRS:	INSRS:	INSRS:	INSRS:
WSP:	WSP:	WSP: Ethicarz	WSP:
Tel:	Tel:	Tel:	Tel:
Liability:	Liability:	Liability: TP	Liability:
RMKS:	RMKS: 01	RMKS:	RMKS:

Date/ Time	
	SJT8492L - X SLU5070L - X
26/7/18	Parts price incomplete. Pending for PA.
26/7/18	- WSP informed Wilson - they will engaged independent surveyor.
27/7/18	Email to AKA - Submit PRS report.
Typist:	Please upload estimate in VLMS.
	LS 7,600/=
	Repair days 14
	RECEIVED ... 2018
	TG Lim 29/8/18

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	> THIN
After call ltr to OI:	2019

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: Confirm by:

FINALIZATION Date/Time: Confirm with: Email Call

Repair Cost: S$ (days) Reduction: % Email Call

FINAL SETTLEMENT Date/Time: 15/10/18 Confirm with Katherine

If NO or B 28, Ass. Lia: 0

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No.: 28
Repair Cost:	S$ 8132.00
Loss of Rental (LOR):	S$ 1926.00 (18 days) x100+GST
Loss of Use (LOU):	S$ (S$ x days)
Loss of Income (LOI):	S$ (S$ x days)
LOR only / LOU only / LOR + LOU / LOR + LOI	[Tick only one]
GIA/LTA Search	S$ 7.45
Medical:	S$
Disbursement:	S$ (e.g. Tow/ Independent)
Legal Cost	S$
Total:	S$ 10065.45 Global Sum S$: 10000.00

COPY SENT 7/3/18

1) Claim status: Normal/Reject/Private Settle

2) Report Format: PRS

3) Survey fee: 350 - $100

FINAL PAYMENT Date/Time: Confirm with: Email Call

Payee 1:	S$ 10000.00	Name 1: ETHICARZ PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:
Payee 3: (Strike if N.A.)	S$	Name 3:

COPY SENT 16/10/18