s3

15/5/2010

INS. CASE OWNER: CC 4 /EQI1801 7526, U pkg

LKK:
IDAC:

ASSIGNMENT

Surveyor: Marcus DOI: 26/9/18 Date / Time : 26/9/18

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : SFP 3654H

Name of Insured : CHUA FONG YEOW LEON

Insured Tel No. : HP: 96669560.

Excess Sec II :S$ D.O.A : 24/9/18

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

If **NO**, Driver Name / Age :

Driver Tel No. : (V/L: YES / NO)

Claim No. :

Policy No. : DMPPM18-015528.

Make / Model : INFINITI

Place of Accident : UPP PAYA LEBAR RD

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

SLL 5687R →

INSRS:
WSP: 200m autowerks
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SLL5687R } WA/A/1180/17484 / 24 DAYS 25/9/18
	SFP3654H }
24/9/18 MT	
4/11/18@ 2.23pm	Called OI, Mr Chua. No response.
23/11/2020	Pls refer to Views for details.

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	SUN 4/11/18
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: L/sum S$ 2,300.00 (4 days) Reduction: 83 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time 23/11/2020 Confirm with Elin Email ☑ Cal ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 15 . If NO or B 28, Ass. Lia :

Repair Cost:	S$ 2,300.00	
Loss of Rental (LOR):	S$ 400.00	(4 days) $100.00
Loss of Use (LOU):	S$	(S x days)
Loss of Income (LOI):	S$	(S x days)
LOR only ☑ LOU only ☐	LOR + LOU ☐	LOR + LO ☐ [Tick only one]
GIA/LTA Search	S$ 7.45	
Medical:	S$	
Disbursement:	S$	(e.g. Tow/ Independent)
Legal Cost	S$	
Total:	S$ 2,707.45	**Global Sum S$:** 2,700.00

1) Claim status: Normal/~~Reject/Private Settle~~
2) Report Format: TP
3) Survey fee: $400.00

FINAL PAYMENT Date/Time: Confirm with: Email ☑ Cal ☐

Payee 1:	S$ 2,700.00	Name 1:	Zoom Autowerks Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	