15/5/2010 Eileen.

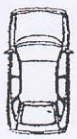
INS. CASE OWNER: Lionel Tan | CC4/FWD19001191/Apa3 | LKK: OK IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 30/01/2019 Date / Time : 18/01/2019

Registered in Merimen: 18/01/2019

Pre-assign / CCU / FTE



Insured Vehicle No. : SLH 9964A Claim No. : 1201900002541

Name of Insured : SEAH KEN CHONG Policy No. : PNPV2018-00001843

Insured Tel No. : HP: Make / Model : NISSAN LATIO-1.5 SPORTS (A)

Excess Sec II :S$ D.O.A : 14/01/2019 10:50 Place of Accident : ALONG JALAN EUNO TOWARDS ECP

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

If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

SKR 6768D → → →

INSRS:
WSP: TEK SOON
Tel : MOTOR
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SLH 9964A - x SKR 6768D - CS/MSG18013400/Ard3n2; DOA: 19/07/18
31/3/20	* TP WSP request to send cheque to LKK, then TP WSP come LKK to collect

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:

Repair Cost: L/S S$ 2700.00 (4 days) Reduction: 52 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 31/3/20 Confirm with TEK SOON Email ☐ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27 If NO or B 28, Ass. Lia :

Repair Cost: S$ 2700.00

Loss of Rental (LOR): S$ (days)

Loss of Use (LOU): S$ 320.00 ($ 80 x 4 days)

Loss of Income (LOI): S$ – ($ x days)

LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ **[Tick only one]**

GIA/LTA Search S$ –

Medical: S$ –

Disbursement: S$ – (e.g. Tow/ Independent)

Legal Cost S$ –

1) Claim status: Normal/Reject/Private Settle C/P

2) Report Format:

3) Survey fee: $ 500.00

Total: S$ 3020.00 **Global Sum S$:**

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

Payee 1:	S$ 3020.00	Name 1:	Tek Soon Motor Repair & Spray Painting
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	