

<b>FINALIZATION</b>		Date/Time:	Confirm with:	Confirm by: <b>CKS</b>
Repair Cost:	<b>P/P</b>	<b>S\$ 902.80</b>	( <b>2</b> days) Reduction: <b>76 %</b>	Email <input type="checkbox"/> Call <input type="checkbox"/>
<b>FINAL SETTLEMENT</b>		Date/Time: <b>04.05.20</b>	Confirm with:	Email <input type="checkbox"/> Call <input type="checkbox"/>
Final Liability:	% <b>100</b>	(Agreed / Assessed) BOLA S/N No. : <b>NIL</b>	If NO or B 28, Ass. Lia :	
Repair Cost:	<b>S\$ -</b> <b>OID REVERSED HIT PARKED TP (REFER TO TP WITNESS NOTE)</b>			
Loss of Rental (LOR):	<b>S\$ -</b>	( <input type="checkbox"/> days)		
Loss of Use (LOU):	<b>S\$ -</b>	(\$ <input type="checkbox"/> x days)		
Loss of Income (LOI):	<b>S\$ -</b>	(\$ <input type="checkbox"/> x days)		
LOR only <input type="checkbox"/>	LOU only <input type="checkbox"/>	LOR + LOU <input type="checkbox"/>	LOR + LOI <input type="checkbox"/>	<b>[Tick only one]</b>
GIA/LTA Search	<b>S\$ -</b>			
Medical:	<b>S\$ -</b>			
Disbursement:	<b>S\$ -</b>		(e.g. Tow/ Independent )	1) Claim status: Normal/ <del>Reject/Private Settle</del>
Legal Cost	<b>S\$ -</b>			2) Report Format: <b>TP / WP</b>
<b>Total:</b>	<b>S\$ -</b>		<b>Global Sum S\$:</b>	3) Survey fee: <b>\$ 250</b>
<b>FINAL PAYMENT</b>		Date/Time:	Confirm with:	Email <input type="checkbox"/> Call <input type="checkbox"/>
Payee 1:	<b>S\$</b>	Name 1:		
Payee 2: (Strike if N.A.)	<b>S\$</b>	Name 2:		
Payee 3: (Strike if N.A.)	<b>S\$</b>	Name 3:		