

LKK REF NO: CC4/AIG19008503/Gea3

FINALIZATION		Date/Time:	Confirm with:	Confirm by: XGQ
Repair Cost:	L/S	S\$ 3,100.00	(4 days) Reduction: 35 %	Email <input type="checkbox"/> Call <input type="checkbox"/>
FINAL SETTLEMENT		Date/Time: 04.07.20	Confirm with:	Email <input type="checkbox"/> Call <input type="checkbox"/>
Final Liability:	% -	(Agreed / Assessed) BOLA S/N No. :		If NO or B 28, Ass. Lia :
Repair Cost:	S\$ -			
Loss of Rental (LOR):	S\$ -	(days)		
Loss of Use (LOU):	S\$ -	(\$ x days)		
Loss of Income (LOI):	S\$ -	(\$ x days)		
LOR only <input type="checkbox"/>	LOU only <input type="checkbox"/>	LOR + LOU <input type="checkbox"/>	LOR + LOI <input type="checkbox"/>	[Tick only one]
GIA/LTA Search	S\$ -			
Medical:	S\$ -			1) Claim status: Normal/ Reject/Private Settle
Disbursement:	S\$ -	(e.g. Tow/ Independent)	2) Report Format:	TP / WP
Legal Cost	S\$ -		3) Survey fee:	\$ 290
Total:	S\$ -	Global Sum S\$:		
FINAL PAYMENT		Date/Time:	Confirm with:	Email <input type="checkbox"/> Call <input type="checkbox"/>
Payee 1:	S\$	Name 1:		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		

** TP PASS TO SOLICITOR TO HANDLE