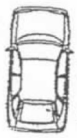
INS. CASE OWNER: [illegible] | CCY / ASM 1900 9805 / UPfa3 | LKK: IDAC: 119436

Surveyor: CKS | DOI: 6/6/19 | Date / Time: 3/6/2019

ASSIGNMENT

Pre-assign / CCU / FTE | Registered in Merimen: -



Insured Vehicle No. : YN959P | Claim No. : SGM01PF1

Name of Insured : SPEX EXPRESS PTE

Insured Tel No. : HP: | Policy No. :

Excess Sec II :S$: D.O.A : 1/6/2019 | Make / Model :

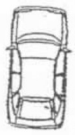
Is driver the owner? (YES / NO) | Nature of Accident : | Place of Accident :

If NO, Driver Name / Age :

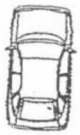
Driver Tel No. : (V/L: YES / NO) | OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

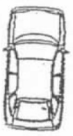
SMK 1386T →



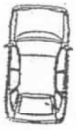
INSRS:
WSP: Kim Chwee
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SMK 1386T. X ; YN959P. X
6/6	07MP. sent out 1st letter.
	PIs refer to Views

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: S$ 250.00 (2 days) Reduction: 87 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 09/04/2020 Confirm with Shi Yiing Email ✓ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 26

Repair Cost: w/GST S$ 267.50 | If NO or B 28, Ass. Lia :

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

Loss of Use (LOU): S$ 120.00 ($ 60 x 2 days)

Loss of Income (LOI): S$ ($ x days)

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

CA/LTA Search S$ 2.00

Medical: S$

Disbursement: S$ | 1) Claim status: Normal/R[redacted]

Legal Cost S$ (e.g. Tow/ Independent) | 2) Report Format: TP

Total: S$ 389.50 **Global Sum S$:** 380.00 | 3) Survey fee: 350.00

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

Payee 1:	S$ 380.00	Name 1:	KIM CHWEE AUTO PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	