15/5/2010

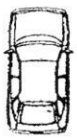
INS. CASE OWNER: MingYao.Lee | CC6/AIG19016846/Kda3 | LKK: IDAC:

ASSIGNMENT

Surveyor: KENNETH DOI: 07/10/2019 Date / Time : 24/09/2019

Registered in Merimen: 24/09/2019

Pre-assign / CCU / FTE



Insured Vehicle No. : SKF 4013A Claim No. : 0407534139SG

Name of Insured : THAE HTET OO Policy No. : 1700006498

Insured Tel No. : HP: +65-91299988 Make / Model : TOYOTA VELLFIRE 2.4Z A

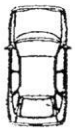
Excess Sec II :S$ D.O.A : 23/09/2019 15:00 Place of Accident : BIDEFORD ROAD TOWARDS CAIRHILL ROAD

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

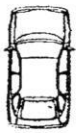
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

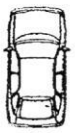
SKK 2828C → → →



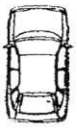
INSRS:
WSP: OPTIMA WERKZ
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SKK 2828C - CC4/ASM19005812/Ueb3q2; DOA: 28.3.19	**STAGE** **DATE / PIC**
	SKF 4013A - X	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$ 5189.53 (4 days) Reduction: 12 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 26/8/2020	Confirm with Sharon	Email ✓ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: (w/GST)	S$ 5552.80		
Loss of Rental (LOR):(w/GST)	S$ 642.00 (4 days) x $150		
Loss of Use (LOU):	S$ - ($ x days)		
Loss of Income (LOI):	S$ - ($ x days)		
LOR only ✓ LOU only ☐	LOR + LOU ☐ LOR + LOI ☐	[**Tick only one**]	
GIA/LTA Search	S$ 2.00		
Medical:	S$ -		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ -	(e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$ -		3) Survey fee: $320
Total:	**S$ 6196.80**	**Global Sum S$:**	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 6196.80	Name 1: Optima Werkz Pte Ltd	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	