15/5/2010

INS. CASE OWNER: CC4/LPC19020668/Uda3s2

LKK:

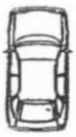
IDAC:

ASSIGNMENT

Surveyor: MARCUS DOI: 31/01/2020 Date / Time : 21/11/2019

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : YN 6626K Claim No. : 19/19/19/VP05/022650

Name of Insured : LOKIT POLYMER PTE LTD Policy No. : Z19VC05003623

Insured Tel No. : HP: Make / Model : MITSUBISHI CANTER-3.0

Excess Sec II :S$ D.O.A : 14/11/2019 Place of Accident : KIM CHUAN TERRACE

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

If NO, Driver Name / Age : ONG LAI XING, ERIC OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : +65-96709320 (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SGG 8517D → → →

INSRS:
WSP: PROGRESSIVE
Tel : CAR CARE
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SGG 8517D - CC6/AXA12018343/Uv1c3	Non-Reporting ltr (1st):	
	YN 6626K - X	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$ 2,800.00 (4 days) Reduction: 52 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 02/05/2020	Confirm with Pei Wen	Email ✓ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: (w/GST)	S$ 2,996.00	OI REVERSED	
Loss of Rental (LOR):	S$ - (days)		
Loss of Use (LOU):	S$ 480.00 ($120 x 4 days)		
Loss of Income (LOI):	S$ - ($ x days)		
LOR only ☐ LOU only ✓	LOR + LOU ☐ LOR + LOI ☐	[Tick only one]	
GIA/LTA Search	S$ 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: $400
Total:	S$ 3,478.00	**Global Sum S$:**	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 3,478.00	Name 1: Progressive Car Care Pte Ltd	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	