15/5/2010

INS. CASE OWNER: LALITHA | CC4/III19021162/Kga3 | LKK: IDAC:

ASSIGNMENT

Surveyor: KENNETH DOI: 02.12.2019 Date / Time : 29.11.2019

Registered in Merimen: 30.11.2019

Pre-assign / CCU / FTE

Insured Vehicle No. : SKX 4568X

Name of Insured : MOHAMED FADZLI BIN HAMSANI

Insured Tel No. : HP: +65-90041251

Excess Sec II :S$ D.O.A : 26.11.19

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

If **NO**, Driver Name / Age :

Driver Tel No. : (V/L: YES / NO)

Claim No. : WX

Policy No. : D18MPC0003141

Make / Model : NISSAN X-TRAIL

Place of Accident : JUNCTION OF FERNVALE LINK & SENGKANG E WAY

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

SMD 6423Z → _____ → _____ → _____

INSRS:
WSP: NGS AUTOMOTIVE
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SMD 6423Z - X	SKX 4568X - X

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: L/S	S$ 2400.00 (4 days)	Reduction: 1927.64 % 45	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 11/05/2020	Confirm with EVELYN	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 2400.00		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 250.00 ($ 50 x 5 days)		
Loss of Income (LOI):	S$ ($ x days)		
LOR only ☐ LOU only ☑ LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]			
GIA/LTA Search	S$ 7.45		
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: $350.00
Total:	S$ 2657.45	**Global Sum S$:**	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 2657.45	Name 1: NGS AUTOMOTIVE	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	