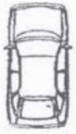


INS. CASE OWNER:

~~CC6/QBE20000897/Kka3~~ASSIGNMENTSurveyor: KENNETHDOI: 17/01/2020Date / Time : 14/01/2020

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : GBD 5129K

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 13/01/2020 09:25Place of Accident : WEST COAST HIGHWAY

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

SMQ 3346PINSRS:
WSP: OPTIMA
Tel : WERKZ
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time

SMQ 3346P - X

GBD 5129K - CC3/QBE18022173/K1jb3q2; DOA: 07.12.18

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:

11/12/2020

Pls refer to VIEWS for details.

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost: P/P S\$ 4,846.00 (5 days) Reduction: 37 %Email ☐ Call ☐FINAL SETTLEMENT Date/Time: 11/12/2020 Confirm with SharonEmail ☒ Call ☐Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27

If NO or B 28, Ass. Lia :

Repair Cost: w/GST S\$ 5,185.22

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

Loss of Use (LOU): S\$ 500.00 (\$ 100 x 5 days) TP private hire veh.

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\$ _____

Disbursement: S\$ _____ (e.g. Tow/ Independent)

Legal Cost S\$ _____

Total: S\$ 5,687.22Global Sum S\$: 5,600.00Email ☒ Call ☐FINAL PAYMENT Date/Time:

Confirm with:

Payee 1: S\$ 5,600.00Name 1: Optima Werkz Pte Ltd

Payee 2: (Strike if N.A.) S\$ _____

Name 2: _____

Payee 3: (Strike if N.A.) S\$ _____

Name 3: _____

1) Claim status: Normal/~~Reject/Private Search~~2) Report Format: TP3) Survey fee: \$400.00