

NOTE: TO BE COMPLETED BY SURVEYOR

TEAM _____

THIRD PARTY EXPRESS SETTLEMENT (PAYMENT BREAKDOWN)

| | | | |
|-------------------|-------------------|--------|----------------------|
| Vehicle No: | SFD62D (Insd veh) | Model: | MERCEDES-BENZ GLA180 |
| | SKZ399H (TP veh) | | 1.6 (A) |
| Date of Accident: | 18/01/2020 | | |

| | | | |
|---|------|--|--|
| Global Sum Settlement | : | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Repair Estimate | : \$ | 16,101.01 | |
| Final Repair Cost | : \$ | 13,690.56 | |
| Loss of Use | : \$ | | days at \$0.00 per day |
| Rental (if any) | : \$ | 2,000.00 | 20 days |
| LTA / GIA Search Fee | : \$ | 2.00 | |
| Others:Towing Fee | : \$ | 50.00 | |
| | : \$ | | |
| Final Settlement Sum | : \$ | 15,742.56 | |
| Is Third Party Workshop GIA Registered? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (Kindly indicate below) | | | |
| A) For <u>Non GIA Registered Workshop</u> : | | Agreed Liability ____100____(%) | |
| B) For <u>GIA Registered Workshop</u> : | | BOLA Applicable: Yes/ No BOLA Scenario No: _____ | |
| BOLA Liability: _____(%) | | Assessed Liability (*): _____(%) | |
| * Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply. | | | |
| Remarks _____ | | | |

| Payment Instruction: Payee's Breakdown | | | |
|--|----------------------|------|-----------|
| 1) | Optima Werkz Pte Ltd | : \$ | 15,742.56 |
| 2) | | : \$ | |
| 3) | | : \$ | |
| 4) | | : \$ | |

JOANNE LEE KHANG MIN

01 Mar
2021

LKK Auto Consultants Pte Ltd

Date

Please attach all the supporting documents to the form.
(Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report;
Medical Report/ Bill (if any))