15/5/2010

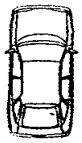
INS. CASE OWNER: Lee, Ming-Yao | CC3/AIG20002295/Eda3 | LKK: IDAC:

ASSIGNMENT

Surveyor: STEVE DOI: 11/02/2020 Date / Time : 10/02/2020

Registered in Merimen: 10/02/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SKC 3789S Claim No. : 9018324725SG

Name of Insured : THE CHURCH OF JESUS CHRIST OF ~~LATTER-DAY SAINTS SINGAPORE~~ LTD Policy No. : 0999994120

Insured Tel No. : HP: Make / Model : TOYOTA PREVIA 8 SEATER

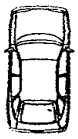
Excess Sec II :S$ D.O.A : 07/02/2020 16:40 Place of Accident : PIE TOWARDS AIRPORT

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

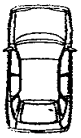
If **NO**, Driver Name / Age : WOO HOI SENG LEONARD OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : +65-96280191 (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

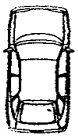
SMD 7478J →



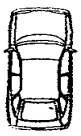
INSRS:
WSP: PREMIUM
Tel : AUTOMOBILES
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SKC3789S - X SMD 7478J - 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:	
PRELIMINARY ADVICE Date/Time: Sent By:		Post-Repair Photos:	
		Others:	

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: L/SUM	S$ 65,000 (38 days) Reduction: 41 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 02/03/2021 Confirm with NADIA		Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28		If NO or B 28, Ass. Lia : 0
Repair Cost:	S$ 69,550.00		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 4,400.00 ($ 100 x 44 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 [redacted]
Disbursement:	S$ (e.g. Tow/ Independent)		2) Report Format: TP
Legal Cost	S$		3) Survey fee: 320.00
Total:	**S$** 73,957.45	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 73,957.45	Name 1:	Premium Automobiles Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	