15/5/2010

INS. CASE OWNER:

CC4/LPC20004066/Kda3

LKK:

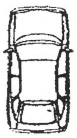
IDAC:

ASSIGNMENT

Surveyor: kenneth DOI: 16/03/2020 Date / Time : 16/03/2020

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SJK 4944Z

Name of Insured : (SHAK B. MD. Salleh

Insured Tel No. : HP:

Excess Sec II :S$

Is driver the owner? (YES / NO)

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

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

Claim No. :

Policy No. :

Make / Model : Honda Fit 1.3(A)

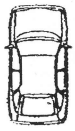
D.O.A : 13/03/2020 Place of Accident : KPE 7 Tunnel

Nature of Accident :

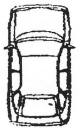
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

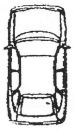
SKA 5748H → _____ → _____ → _____



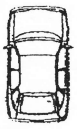
INSRS:
WSP: D'GARAGE
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SKA 5748H - X
	SJK 4944Z - CS/III13016767/Ktbd1 - 04/09/2013
	CS3/III13016760/Gtk3 - 04/09/2013
	CS3/LPC17013292/Jvbn2 - 05/07/2017

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: S$ 2250.00 (4 days) Reduction: 75 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 23/9/2020 Confirm with Sam Email / Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	S$2250.00	
Loss of Rental (LOR):	S$428.00 (4 days) x $100 (w/GST)	
Loss of Use (LOU):	S$ - ($ x 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: $400
Total:	**S$ 2685.45**	**Global Sum S$:**

FINAL PAYMENT Date/Time: Confirm with: Email ☐ Call ☐

Payee 1:	S$ 2685.45	Name 1:	D'Garage LLP
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	