

LKK REF NO: CC6/AIG20004339/Aea3

|                                              |                                   |                                                           |                                    |                                                                         |
|----------------------------------------------|-----------------------------------|-----------------------------------------------------------|------------------------------------|-------------------------------------------------------------------------|
| <b>FINALIZATION</b>                          |                                   | Date/Time:                                                | Confirm with:                      | Confirm by: LWP                                                         |
| Repair Cost:                                 | L/S                               | S\$ 3,400.00                                              | ( 3 days) Reduction: 50 %          | Email <input type="checkbox"/> Call <input type="checkbox"/>            |
| <b>FINAL SETTLEMENT</b>                      |                                   | Date/Time: 04.06.20                                       | Confirm with SHARON                | Email <input checked="" type="checkbox"/> Call <input type="checkbox"/> |
| Final Liability:                             | % 100                             | (Agreed / Assessed) BOLA S/N No. : NIL                    |                                    | If NO or B 28, Ass. Lia :                                               |
| Repair Cost:                                 | w/GST                             | S\$ 3,638.00                                              | OID REVERSED HIT TP PARKED VEHICLE |                                                                         |
| Loss of Rental (LOR):                        | S\$ 300.00                        | ( 3 days) X \$100                                         |                                    |                                                                         |
| Loss of Use (LOU):                           | S\$ -                             | (\$ x days)                                               |                                    |                                                                         |
| Loss of Income (LOI):                        | S\$ -                             | (\$ x days)                                               |                                    |                                                                         |
| LOR only <input checked="" type="checkbox"/> | LOU only <input type="checkbox"/> | LOR + LOU <input type="checkbox"/>                        | LOR + LOI <input type="checkbox"/> | [Tick only one]                                                         |
| GIA/LTA Search                               | S\$ 7.45                          |                                                           |                                    |                                                                         |
| Medical:                                     | S\$ -                             | 1) Claim status: Normal/ <del>Reject/Private Settle</del> |                                    |                                                                         |
| Disbursement:                                | S\$ -                             | (e.g. Tow/ Independent )                                  | 2) Report Format:                  | TP                                                                      |
| Legal Cost                                   | S\$ -                             |                                                           | 3) Survey fee:                     | \$ 320                                                                  |
| <b>Total:</b>                                | S\$ 3,945.45                      | <b>Global Sum S\$:</b>                                    |                                    |                                                                         |
| <b>FINAL PAYMENT</b>                         |                                   | Date/Time: 04.06.20                                       | Confirm with: SHARON               | Email <input checked="" type="checkbox"/> Call <input type="checkbox"/> |
| Payee 1:                                     | S\$ 3,945.45                      | Name 1:                                                   | MG SOLUTION PTE LTD                |                                                                         |
| Payee 2: (Strike if N.A.)                    | S\$                               | Name 2:                                                   |                                    |                                                                         |
| Payee 3: (Strike if N.A.)                    | S\$                               | Name 3:                                                   |                                    |                                                                         |