15/5/2010

INS. CASE OWNER:

CC4/LPC20005091/Uka3

LKK:

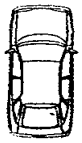
IDAC:

ASSIGNMENT

Surveyor: MARCUS DOI: Date / Time : 08/04/2020

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : GW 8893H

Name of Insured : MR. PLUMBER SINGAPORE PTE LTD

Insured Tel No. : HP:

Excess Sec II :S$ D.O.A : 31/03/2020

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

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

Driver Tel No. : +65-83746086 (V/L: YES / NO)

Claim No. : 19/20/20/VC05/023276

Policy No. : Z19VC05004062

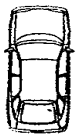
Make / Model : TOYOTA HIACE DIESEL

Place of Accident : SLE EXIT 1

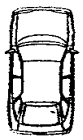
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

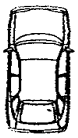
FBP 4375J → → →



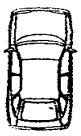
INSRS:
WSP: BAN HOCK HIN
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	FBP 4375J - X GW 8893H - 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:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: P/P S$ 1,357.20 (3 days) Reduction:1,493.80/52% Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 25/11/2020 Confirm with RAYMOND Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost: (W/GST)	S$ 1,452.20	Traffic police investigation outcome is against Insured . Insured driver filtering lane
Loss of Rental (LOR):	S$ (days)	
Loss of Use (LOU):	S$ 60.00 ($ 20 x 3 days)	
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$	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$** 1,514.20 **Global Sum S$:**	

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

Payee 1:	S$ 1,514.20	Name 1:	BAN HOCK HIN CO PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	