15/5/2010

INS. CASE OWNER: NG Stacey 6568804351

CC4/ASM20005375/Uea3

LKK:

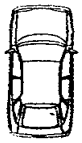
IDAC: 168374

ASSIGNMENT

Surveyor: MARCUS DOI: 24/04/2020 Date / Time : 24/04/2020

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : YQ 53L

Name of Insured : JUST R ENTERPRISE PTE LTD

Insured Tel No. : HP:

Excess Sec II :S$ D.O.A : 22/04/2020 16:55

Is driver the owner? (YES / NO)

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

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

Claim No. : S0M02N03

Policy No. :

Make / Model : MITSUBISHI FUSO

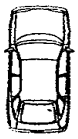
Place of Accident : 16 TAMPINES INDUSTRIAL CRESCENT

Nature of Accident :

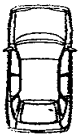
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

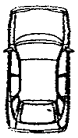
GBF 9143G → → →



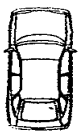
INSRS:
WSP: LIU'S BROTHER AUTO
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	GBF 9143G - X YQ 53L - 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: CKS
Repair Cost: L/S	S$ 5,200.00 (4 days)	Reduction: 51 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 26.01.21	Confirm with SUSAN	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 5,200.00	OID REVERSED HIT TP VEHICLE	
Loss of Rental (LOR):	S$ - (days)		
Loss of Use (LOU):	S$ 360.00 ($ 60 x 6 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: $350
Total:	**S$** 5,562.00	**Global Sum S$:**	

FINAL PAYMENT	Date/Time: 26.01.21	Confirm with: SUSAN	Email ☐ Call ☐
Payee 1:	S$ 5,562.00	Name 1:	LIU'S BROTHER AUTO ENGINEERING WORKSHOP
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	