15/5/2010

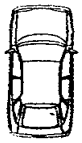
INS. CASE OWNER: KHONG Lynn | CC4/ASM20006253/Kes3 | LKK: IDAC: 171336

ASSIGNMENT

Surveyor: MARCUS DOI: 11/06/2020 Date / Time : 11/06/2020

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : XD 4567A Claim No. : S0M02P2Z

Name of Insured : UBTS PTE LTD Policy No. : P2067982

Insured Tel No. : HP: Make / Model : HINO SH1EEKA

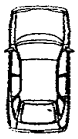
Excess Sec II :S$ D.O.A : 09/06/2020 Place of Accident : AYE EXIT TOWARDS NUS

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

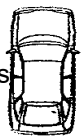
If **NO**, Driver Name / Age : TAN YEK KOW OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : 91200889 (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

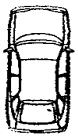
SLS 4454E → → →



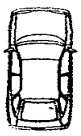
INSRS:
WSP: Lian Hong
Tel : Seng Motor Works
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SLS 4454E - NA/INC18022944/z4 ; 20/12/2018	
	XD 4567A - CS3/AXA13003165/Yy1d1 ; 29/01/2013	
	CC6/AXA14004659/Gsy3c3 ; 03/03/2014	

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: KSC

Repair Cost: L/S S$ 6,300.00 (8 days) Reduction: 62 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 14.12.21 Confirm with SHERMAINE Email ☐ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 6,300.00	OID CHANGED LANE HIT TP
Loss of Rental (LOR):	S$ - (days)	
Loss of Use (LOU):	S$ 560.00 ($ 70 x 8 days)	
Loss of Income (LOI):	S$ - ($ x days)	
LOR only ☐ LOU only ☑ LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]		
GIA/LTA Search	S$ -	
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: $350
Total:	**S$** 6,860.00 **Global Sum S$:** 6,800.00	

FINAL PAYMENT Date/Time: 14.12.21 Confirm with: SHERMAINE Email ☐ Call ☐

Payee 1:	S$ 6,800.00	Name 1:	LIAN HONG SENG MOTOR WORKS
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	