

INS. CASE OWNER:

CC 6 / LPC 2000 6263 / Ugs3

LKK:

IDAC:

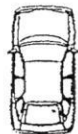
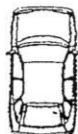
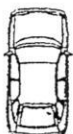
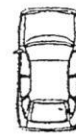
ASSIGNMENT

Surveyor: MarcusDOI: 12/06/2020Date / Time : 12/06/2020Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : SLA 2906BClaim No. : Name of Insured : NG HUA SENGPolicy No. : Insured Tel No. : HP: Make / Model : Excess Sec II : S\$ D.O.A : 12/06/2020Place of Accident : Is driver the owner? (☒ YES / NO) Nature of Accident : If NO, Driver Name / Age : OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NODriver Tel No. : (V/L: ☒ YES / NO)Insured Liability : % Final ? Yes / No

SLT 8053Y

INSRS:
WSP: **FASTECH**
Tel :
Liability :
RMKS: INSRS:
WSP:
Tel :
Liability :
RMKS: INSRS:
WSP:
Tel :
Liability :
RMKS: INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time

SLT 8053Y : X ; SLA 2906B : 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: L/S S\$ 2000.00 (3 days) Reduction: 4963.60 % 71

Email ☒ Call ☐

FINAL SETTLEMENT Date/Time: 29/07/2020 Confirm with SHI YING

Email ☒ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 23

If NO or B 28, Ass. Lia :

Repair Cost: (W/GST) S\$ 2140.00

Loss of Rental (LOR): S\$ (days)

Loss of Use (LOU): S\$ 180.00 (\$ 60.00 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\$

Disbursement: S\$ (e.g. Tow/ Independent)

Legal Cost S\$

Total: S\$ 2322.00

Global Sum S\$:

FINAL PAYMENT Date/Time:

Confirm with:

Email ☒ Call ☐

Payee 1: S\$ 2322.00

Name 1: **FASTECH AUTO PTE LTD**

Payee 2: (Strike if N.A.) S\$

Name 2:

Payee 3: (Strike if N.A.) S\$

Name 3:

1) Claim status: ☒ Normal/Reject/Private Settle2) Report Format: **TP**3) Survey fee: **\$450.00** 400