	15/5/2010					LKK:				
	INS. CASE OWNER	ERIC WOO	CS3/FCI200031	CS3/FCI20003123/Qra3s		IDAC:				
	11010102011121	.	ASSIGNM	ASSIGNMENT		1	-	-		
		OI SUN PIN	DOI: 25/02/2020	<u> </u>	2	3/06/2020 (-	1)			
	Surveyor: OI SUN PIN				Date / Time : 2	3/00/2020 (-	')			
					Registered in Meri	men:				
	Pre-assign / CCU	/ FTE								
	Insured Vehicle No	. SHB 2329J	Claim No. : D20001149MFSH							
		·						_		
	Name of Insured	:		Policy No.	:					
	Insured Tel No.	:	HP:	Make / Model	:					
	Excess Sec II :S\$		D.O.A: 21/02/2020	Place of Accide	ent :					
	Is driver the owner	? (YES / NO)	Nature of Accident :		· · · ·					
			Nature of Accident .							
		NO, Driver Name / Age:		OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO						
	Driver Tel 1	No. :	(V/L: YES / NO)	Insured Liabilit	y: %	Final? Yes/N	0			
	GBD 9780C					_				
							-	_		
	INSRS:	INSRS	:	INSRS:		INSRS:				
	WSP: JAS AUT	O WSP:		WSP:		WSP:				
l l	Tel: SERVIC Liability:	ES Tel : Liabilit	H H	Tel : Liability :	H H	Tel : Liability :				
	RMKS:	RMKS	W-W	RMKS:		RMKS:				
		CAIVIA		KWK3.		KWK5.				
	Date/ Time									
		GBD 9780C	20003123/Qtf3s2; 21/02/2020		STAGE		ATE / 1	PIC		
			6005470/H1pb3n2; 22/03/2016		Non-Reporting ltr (1 Non-Reporting ltr (2					
					Non-Reporting ltr (F					
	Dear LKK,				Notification ltr (if non-pickup):					
	Kindly refer to attached.				Call OI:					
						After call ltr to OI:				
		Please advise if you are able to do Express Settlement with TP workshop.		Documentation enterior limitate 1, plat						
		Thank you.			Notification ltr (if no	n-pickup)		<u> </u>	╅	
		Eric Woo			After call ltr to OI:	L	=	┾	<u> </u>	
					Authorisation To Ac	t:	4	<u> </u>	<u>]</u>	
					Release Voucher: Final Repair Bill:		_	+	<u></u>	
					Car Rental Invoice:		\dashv	+	1	
					Towing Invoice	<u> </u>	\dashv	十	┼	
					LTA / GIA :		\dashv	+	╬	
					Medical Bill:		=	+	+	
					PIR:		=	十	十	
					Mandate/Reject Ins	struction:	\dashv	\vdash	╪	
					LOD		一	+	†	
					Payment Breakdow	vn Form:		$\overline{}$	i	
PRELIN	MINARY ADVICE	Date/Time:	Sent By:		Post-Repair Photos				j	
			<u> </u>		Others:					
FINALI	ZATION	Date/Time:	Confirm with:		Confirm by:					
Repair C	ost: L/SUM		5 days) Reduction: 62	%		Email Cal	1]		
FINAL S	SETTLEMENT	Date/Time: 20.11.2020	Confirm with JAS AUTO		Email Call					
Final Lia					If NO or B 28, Ass	. Lia :				
Repair C		ss 6,200.00	100.00							
	Rental (LOR):	s\$ 700.00 (7	7 days) x 100.00							
Loss of U	Jse (LOU):	S\$ (\$ x	days)							

days)

Global Sum S\$:

Confirm with:

Name 1:

Name 2:

Name 3:

[Tick only one]

JAS AUTO SERVICES

(e.g. Tow/ Independent)

1) Claim status: Normal/

Email Call

2) Report Format: TP
3) Survey fee: 600-150=450.00

LOR + LOI

(\$ LOR + LOU

Loss of Income (LOI): S
LOR only LOU only

S\$

S\$

S\$

S\$

S\$

S\$

s\$ 6,900.00

ss 6,900.00

Date/Time:

GIA/LTA Search

FINAL PAYMENT

Payee 2: (Strike if N.A.)

Payee 3: (Strike if N.A.)

Disbursement: Legal Cost

Medical:

Total:

Payee 1: