15/5/2010

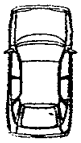
INS. CASE OWNER: SALIHA | ~~CC4/AIG20007019/Uka3~~ | LKK: IDAC:

ASSIGNMENT CC4/AIG20007019/Upa3

Surveyor: MARCUS DOI: 06.07.2020 Date / Time : 06.07.2020

Registered in Merimen: 06.07.2020

Pre-assign / CCU / FTE



Insured Vehicle No. : GBC 1836J | Claim No. : 6895523372SG

Name of Insured : I LOGISTICS PTE LTD | Policy No. : 0999993961

Insured Tel No. : HP: | Make / Model : TOYOTA HIACE 3.0 DX M

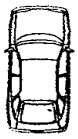
Excess Sec II :S$ D.O.A : 29/06/2020 | Place of Accident : PUNGGOL FIELD ROAD

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

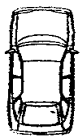
If **NO**, Driver Name / Age : YAN YUANYUAN | OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

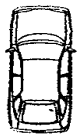
FBP 6615D → → →



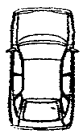
INSRS:
WSP: EROFIA MOTOR
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	FBP 6615D - X GBC 1836J - X	
12/04/2021	Pls refer to VIEWS for details.	

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/sum S$ 1,600.00 (4 days) Reduction: 66 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 12/04/2021 Confirm with LeeLee Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 100
Repair Cost:	S$ 1,600.00	
Loss of Rental (LOR):	S$ (days)	
Loss of Use (LOU):	S$ 100.00 ($ 20 x 5 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: $320.00
Total:	**S$** 1,700.00 **Global Sum S$:** 1,700.00	

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

Payee 1:	S$ 1,700.00	Name 1:	Erofia Motor Trading Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	