

INS. CASE OWNER:

CC 4 /AIG 2000 7211 / Qds3

LKK:

IDAC:

ASSIGNMENT

Surveyor:

OSP

DOI:

14/07/2020

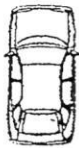
Date / Time :

09/07/2020

Registered in Merimen:

09/07/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : **SLL 5471K**
 Name of Insured : **ANG KOK BENG KELVIN**
 Insured Tel No. : _____ HP: _____
 Excess Sec II : \$S _____ D.O.A : **01/07/2020**
 Is driver the owner? (☒ YES / NO) Nature of Accident : _____

Claim No. : _____

Policy No. : _____

Make / Model : _____

Place of Accident : _____

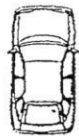
If NO, Driver Name / Age :

Driver Tel No. :

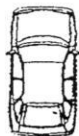
(V/L: ☒ YES / NO)OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NO

Insured Liability : % Final ? Yes / No

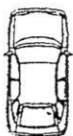
PC 6207B



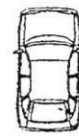
INSRS:
WSP: **SMRT**
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time

PC 6207B : X ; SLL 5471K : 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/SUM** \$S **2,450.00** (**3** days) Reduction: **85** %Email ☐ Call ☐FINAL SETTLEMENT Date/Time: **19/3/2021** Confirm with **KAREN**Email ☒ Call ☐Final Liability: % **100** (Agreed / Assessed) BOLA S/N No. : **27**

If NO or B 28, Ass. Lia :

Repair Cost: **w/GST** \$S **2,621.50**

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

Loss of Use (LOU): \$S **500.00** (\$ **100** 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 **7.49**

Medical: \$S

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

Legal Cost \$S

Total: \$S **3,128.99** Global Sum \$S: **3,100.00**1) Claim status: Normal ~~Reject/Private South~~2) Report Format: **TP**3) Survey fee: **320.00**

FINAL PAYMENT Date/Time:

Confirm with:

Email ☐ Call ☐Payee 1: \$S **3,100.00**Name 1: **BUS-PLUS SERVICES PTE LTD**

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

Name 2:

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

Name 3: