

INS. CASE OWNER:

CC 4 /LPC 2000 7855 / Egs3

LKK:

IDAC:

ASSIGNMENT

Surveyor:

STEVE

DOI:

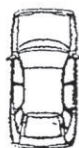
30/07/2020

Date / Time :

30/07/2020

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : GBJ 9759J

Claim No. : _____

Name of Insured : METALIS PTE LTD

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :SS D.O.A :29/07/2020

Place of Accident : _____

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

If NO, Driver Name / Age :

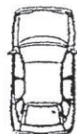
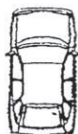
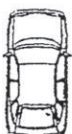
OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NO

Driver Tel No. :

(V/L: ☒ YES / NO)

Insured Liability : % Final ? Yes / No

GZ 713G

INSRS:
WSP: RYDER
Tel: AUTO
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:

Date/ Time	STAGE	DATE / PIC
GZ 713G : NA/INC20007877/z4 ; DOA 29/07/2020	Non-Reporting ltr (1st):	
GBJ 9759J :	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 / GLA :	☐ ☐
	Medical Bill:	☐ ☐
	PIR:	☐ ☐
	Mandate/Reject Instruction:	☐ ☐
	LOD	☐ ☐
	Payment Breakdown Form:	☐ ☐
PRELIMINARY ADVICE Date/Time:	Post-Repair Photos:	☐ ☐
	Others:	☐ ☐
FINALIZATION Date/Time:	Confirm with:	Confirm by:
Repair Cost: L/S S\$ 5550.00 (12 days) Reduction: 6903.72 % 55		Email ☐ Call ☐
FINAL SETTLEMENT Date/Time: 16/09/2020 Confirm with JUNE		Email ☒ Call ☐
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :
Repair Cost: S\$ 5938.50 (W/GST)		
Loss of Rental (LOR): S\$ (days)		
Loss of Use (LOU): S\$ 1020.00 (\$ 60 x 17 days)		
Loss of Income (LOI): S\$ (\$ x days)		
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search S\$ 31.00		
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: \$400.00
Total: S\$ 6989.50 Global Sum S\$:		
FINAL PAYMENT Date/Time:	Confirm with:	Email ☒ Call ☐
Payee 1: S\$ 6989.50 Name 1: RYDER AUTO PTE LTD		
Payee 2: (Strike if N.A.) S\$ Name 2:		
Payee 3: (Strike if N.A.) S\$ Name 3:		