

INS. CASE OWNER:

OH Vale

CC 4 /ASM 2000 8598 / Abs3

LKK:

IDAC:

177455

ASSIGNMENT

Surveyor:

Adrian

DOI:

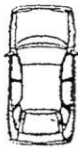
18/08/2020

Date / Time :

18/08/2020

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

YP 2189X

Claim No. :

S0M02SCT

Name of Insured :

WYN2000 LOGISTICS PTE. LTD.

Policy No. :

P1769401

Insured Tel No. :

HP: _____

Make / Model :

Excess Sec II :S\$

D.O.A : 17/08/2020

Place of Accident :

Is driver the owner?

(YES / ☒ NO)

Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. :

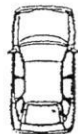
(V/L: ☒ YES / NO)OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NO

Insured Liability :

%

Final ? Yes / No

SFN 280M



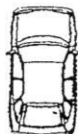
INSRS:

WSP: SM AUTOMOTIVE

Tel :

Liability :

RMKS:



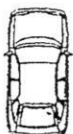
INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

SFN 280M : X ; YP 2189X : 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:

24/09/2020 SETTLED AND CLOSED / NO PHY FILE

PRELIMINARY ADVICE

Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost: L/S

S\$ 3,400.00

(5 days)

Reduction: 58.56

%

Email ☐Call ☐

FINAL SETTLEMENT

Date/Time: 23/09/2020

Confirm with SUKYI CHONG

Email ☒Call ☐

Final Liability:

%

100

(Agreed / Assessed) BOLA S/N No. : 23

If NO or B 28, Ass. Lia :

Repair Cost:

S\$

3,400.00

Loss of Rental (LOR):

S\$

(

days)

Loss of Use (LOU):

S\$

480.00

(\$ 80

x 6

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\$

3,882.00

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☐Call ☐

Payee 1:

S\$

3,882.00

Name 1:

SM AUTOMOTIVE

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

TP
\$350.00

OID parking