15/5/2010

INS. CASE OWNER: CC 4 / AIG 2000 8742 / Ues3

LKK:

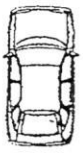
IDAC:

ASSIGNMENT

Surveyor: Marcus DOI: 20/08/2020 Date / Time : 20/08/2020

Registered in Merimen: 20/08/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SJH 7503J Claim No. :

Name of Insured : OCEAN CARZ LEASING PTE LTD Policy No. :

Insured Tel No. : HP: Make / Model :

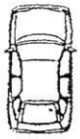
Excess Sec II :S$ D.O.A : 07/08/2020 Place of Accident :

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

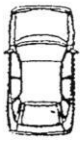
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

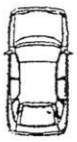
FBR 2724M → → →



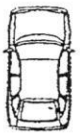
INSRS:
WSP: EROFIA
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	FBR 2724M : X SJH 7503J : CS/INC10011693/Gbn ; DOA : 07/05/2010

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: CKS

Repair Cost: L/S S$ 3,200.00 (4 days) Reduction: 61 % Email [ ] Call [ ]

FINAL SETTLEMENT Date/Time: 23.02.21 Confirm with LEE LEE Email [ ] Call [ ]

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 4a If NO or B 28, Ass. Lia :

OID TRAVEL STRAIGHT WITH A STOP LINE

Repair Cost: S$ 3,200.00

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

Loss of Use (LOU): S$ 120.00 ($ 20 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$ -

Medical: S$ -

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

Legal Cost S$ -

1) Claim status: Normal/~~Reject/Private Settle~~

2) Report Format: TP

3) Survey fee: $320

Total: **S$ 3,320.00** **Global Sum S$:**

FINAL PAYMENT Date/Time: 23.02.21 Confirm with: LEE LEE Email [ ] Call [ ]

Payee 1:	S$ 3,320.00	Name 1:	EROFIA TRADING PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	