15/5/2010

INS. CASE OWNER: CC 3 /AIG 2000 9097 / R1es3

LKK:

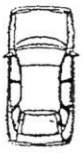
IDAC:

ASSIGNMENT

Surveyor: RASUL DOI: 07/09/2020 Date / Time : 28/08/2020

Registered in Merimen: 28/08/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SMA 8107P Claim No. :

Name of Insured : Wouter Wilhem Kalis Policy No. :

Insured Tel No. : HP: Make / Model :

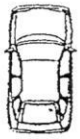
Excess Sec II :S$ D.O.A : 22/08/2020 Place of Accident :

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

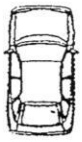
If NO, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

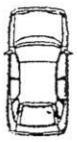
SLE 3620Y → → →



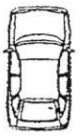
INSRS:
WSP:
Tel : PERFORMANCE
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SLE 3620Y : X ; SMA 8107P : X
28/08/2020	- OINR *** SENT OUT FIRST NON-REPORTING LETTER

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: MRB

Repair Cost: P/P S$ 14,425.10 (12 days) Reduction: 16 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time:03.11.20 Confirm with CAROLINE Email ☐ Call ☐

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

OID GO STRAIGHT ON A TURNING LANE HIT TP

Repair Cost: w/GST S$ 15,434.86

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

Loss of Use (LOU): S$ 720.00 ($ 60 x 12 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$ -

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

2) Report Format: TP

3) Survey fee: $320

Total: S$ 16,156.86 **Global Sum S$:**

FINAL PAYMENT Date/Time: 03.11.20 Confirm with: CAROLINE Email ☐ Call ☐

Payee 1:	S$ 16,156.86	Name 1:	PERFORMANCE MOTORS LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	