15/5/2010

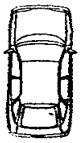
INS. CASE OWNER: ONG LI LI | CC4/LPC20009625/Epa3n2 | LKK: IDAC:

ASSIGNMENT

Surveyor: Steve DOI: 11/09/2020 Date / Time : 08/09/2020

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : SJQ 6863D Claim No. : 20/20/20/VP05/023584

Name of Insured : SUHAYL BIN MUHAMMAD SALPAI Policy No. : Z20VP05026806

Insured Tel No. : HP: Make / Model : MITSUBISHI LANCER-1.5 (A)

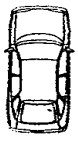
Excess Sec II :S$ D.O.A : 25/08/2020 13:00 Place of Accident : SENJA LINK

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

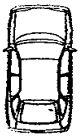
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

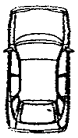
SGG 239J → → →



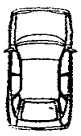
INSRS:
WSP: VOLKSWAGEN
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SGG 239J - NBA/LPC20009023/Y ; 25/08/2020	**STAGE** **DATE / PIC**
	SJQ 6863D - NA/DAI17013088/k4 ; 05/07/2017	Non-Reporting ltr (1st):
	NBA/LPC20009023/Y ; 25/08/2020	Non-Reporting ltr (2nd):
		Non-Reporting ltr (Final):
		Notification ltr (if non-pickup):
		Call OI:
		After call ltr to OI:
06/10/2020	Pls refer to VIEWS for details.	**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: ☐
PRELIMINARY ADVICE Date/Time:	Sent By:	Post-Repair Photos: ☐ ☐
		Others: ☐ ☐

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: P/P	S$ 3,670.12 (3 days) Reduction: 56 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time 06/10/2020	Confirm with Meiy	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 3,927.03		
Loss of Rental (LOR): w/GST	S$ 321.00 (3 days)	x$100	
Loss of Use (LOU):	S$ ($ x 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$		1) Claim status: Normal/~~Reject/Private Settle~~
Disbursement:	S$ (e.g. Tow/ Independent)		2) Report Format: TP
Legal Cost	S$		3) Survey fee: $400.00
Total:	**S$** 4,248.03	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 4,248.03	Name 1:	Volkswagen Group Singapore Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	