

INS. CASE OWNER:

CC 6 / AIG 2000 9925 / Kes3

LKK:

IDAC:

ASSIGNMENT

Surveyor: KennethDOI: 16/09/2020Date / Time : 16/09/2020Registered in Merimen: 16/09/2020

Pre-assign / CCU / FTE

Insured Vehicle No. : SKW 5362X

Claim No. : _____

Name of Insured : HO KWAI YUEN

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : \$\$ _____ D.O.A : 14/09/2020

Place of Accident : _____

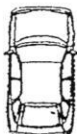
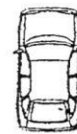
Is driver the owner? (☒ YES / NO) Nature of Accident : _____

If NO, Driver Name / Age : _____

OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NODriver Tel No. : _____ (V/L: ☒ YES / NO)

Insured Liability : _____ % Final ? Yes / No

SJG 8883K

INSRS:
WSP: OPTIMA WERKZ
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time

SJG 8883K : X ; SKW 5362X : 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:

PRELIMINARY ADVICE Date/Time:

Sent By:

Post-Repair Photos:

Others:

FINALIZATION

Date/Time:

Confirm with:

Confirm by: KSCRepair Cost: L/S \$S 6,000.00 (4 days) Reduction: 36 %Email ☐ Call ☐

FINAL SETTLEMENT

Date/Time: 06.04.21Confirm with LILYEmail ☐ Call ☐Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 1

If NO or B 28, Ass. Lia :

Repair Cost: w/GST \$S 6,420.00

OI EXIT FROM SLIP ROAD WITH GIVE WAY LINE HIT TP

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

Loss of Use (LOU): \$S 720.00 (\$ 180 x 4 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 Settle2) Report Format: TP3) Survey fee: \$320Total: \$S 7,142.00 Global Sum \$S: 7,100.00

FINAL PAYMENT

Date/Time: 06.04.21Confirm with: LILYEmail ☐ Call ☐Payee 1: \$S 7,100.00Name 1: OPTIMA WERKZ PTE LTD

Payee 2: (Strike if N.A.) \$S

Name 2:

Payee 3: (Strike if N.A.) \$S

Name 3: