15/5/2010

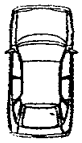
INS. CASE OWNER: Lee Ming Yao | CC4/AIG20010263/Dra3 | LKK: IDAC:

ASSIGNMENT

Surveyor: BRYAN DOI: Date / Time : 24/09/2020

Registered in Merimen: 24/09/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SGM 1457H Claim No. : : 7923740630SG

Name of Insured : CONSTANCE ANG LI SHAN Policy No. : 2100215651-10

Insured Tel No. : HP: Make / Model :

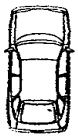
Excess Sec II :S$ D.O.A : 22/09/2020 00:30 Place of Accident : PIE TWDS TUAS AFTER WHITLEY RD

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

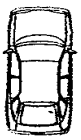
If **NO**, Driver Name / Age : RICHARD LOWELL O'BRIEN OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : +65-98288149 (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

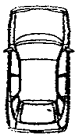
SFS 898E → → →



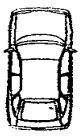
INSRS:
WSP: Teamwork Garage
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SFS 898E - X SGM 1457H - 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:
Repair Cost: L/SUM	S$ 11,000.00 (9 days) Reduction: 79 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 10/05/2021	Confirm with SHU SHAN	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 11,770.00		
Loss of Rental (LOR):	S$ 990.00 (9 days) x $110.00		
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ ($ x days)		
LOR only ☑ LOU only ☐	LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]		
GIA/LTA Search	S$ 36.45		
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: 320.00
Total:	**S$** 12,796.45	**Global Sum S$:** 12,790.00	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 12,790.00	Name 1:	Teamwork Garage Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	