15/5/2010

INS. CASE OWNER: NG Stacey 6568804351

CC4/ASM20011841/Aba3

LKK:

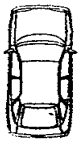
IDAC: 186082

ASSIGNMENT

Surveyor: ADRIAN DOI: 26/11/2020 Date / Time : 30/10/2020

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : FBP 1837M Claim No. : S0M02W3Z

Name of Insured : NUR ALIAA BINTE MOHAMMED NORMAN Policy No. : P2259183

Insured Tel No. : HP: Make / Model : PIAGGIO VESPA PRIMAVERA 150 ABS

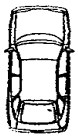
Excess Sec II :S$ D.O.A : 26/10/2020 14:20 Place of Accident : SEMBAWANG ROAD

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

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

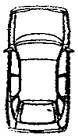
Driver Tel No. : (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SMD 6698Y →

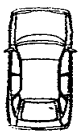


INSRS:
WSP: SmartOne Auto Pte. Ltd.
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SMD 6698Y - X FBP 1837M - X	
04/02/2021	SETTLED AND CLOSED / NO PHY FILE	

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:

Repair Cost: L/S S$ 2,200.00 (3 days) Reduction: 57.33 % Email ✓ Call

FINAL SETTLEMENT Date/Time: 02/02/2021 Confirm with MICHELLE Email ✓ Call

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 2,200.00	
Loss of Rental (LOR):	S$ 360.00 (3 days) x $120.00	OID veh slight to the left and cause collision. PIR down on OID
Loss of Use (LOU):	S$ ($ x days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only ✓ LOU only	LOR + LOU LOR + LOI [**Tick only one**]	
GIA/LTA Search	S$ 7.45	
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: $350.00
Total:	**S$** 2,567.45 **Global Sum S$:**	

FINAL PAYMENT Date/Time: Confirm with: Email Call

Payee 1:	S$ 2,567.45	Name 1:	SMARTONE AUTO PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	