15/5/2010

INS. CASE OWNER: CC3/AIG20013828/Ggs3

LKK:

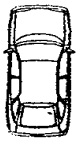
IDAC:

ASSIGNMENT

Surveyor: XGQ DOI: 14/12/2020 Date / Time : 15/12/2020

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : GX 9676G Claim No. :

Name of Insured : LASER ACE CABLE & ACCESSORIES PTE LTD Policy No. :

Insured Tel No. : HP: Make / Model :

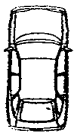
Excess Sec II :S$ D.O.A : 11/12/2020 Place of Accident :

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

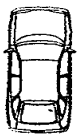
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

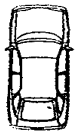
SHD 6234L → → →



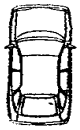
INSRS:
WSP: SMRT
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SHD 6234L : NS/INC18013511/R1rbe2 ; DOA : 22/07/2018	**STAGE** **DATE / PIC**
	GX 9676G : C3/AIG10020449/Kn1f2q2 ; DOA : 09/10/2010	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/S	S$ $2,200.00 (4 days)	Reduction: $7,945.14 % 78	Email Call
FINAL SETTLEMENT	Date/Time: 04/06/2021	Confirm with LEE GEK	Email ✓ Cal
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 9	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 2,200.00		
Loss of Rental (LOR):	S$ 545.70 (5 days)	x $109.14	
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ 250.00 ($ 50 x 5 days)		
LOR only LOU only LOR + LOU LOR + LO ✓	[**Tick only one**]		
GIA/LTA Search	S$ 7.00		
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: $320.00
Total:	**S$** 3,002.70	**Global Sum S$:**	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ✓ Cal

Payee 1:	S$ 3,002.70	Name 1:	SMRT TAXIS PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	