15/5/2010

INS. CASE OWNER: ANG Richard 6880 5450

CC4/ASM20013839/Uba3

LKK:

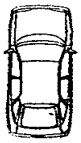
IDAC: 191340

ASSIGNMENT

Surveyor: MARCUS DOI: 15/12/2020 Date / Time : 15/12/2020

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SMQ 5116Z Claim No. : S0M02YWA

Name of Insured : Policy No. : P2385062

Type text here

Insured Tel No. : HP: Make / Model : HONDA VEZEL

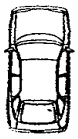
Excess Sec II :S$ D.O.A : 13/12/2020 06:40 Place of Accident : SIMS AVENUE BESIDE LOR 27 GEYLANG

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

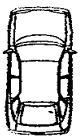
If **NO**, Driver Name / Age : CHAN CHEE SENG (ZHENG ZHISHENG) OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

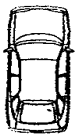
GBJ 5088M → → →



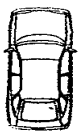
INSRS:
WSP: LEE BROTHERS AUTOMOTIVE
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	GBJ 5088M - X SMQ 5116Z - X	
04/05/2021	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$ 10,500.00 (9 days) Reduction: 36.83 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 04/05/2021 Confirm with SEBASTIAN Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: (W/GST)	S$ 11,235.00	
Loss of Rental (LOR):	S$ 1,430.00 (11 days) x $130.00	
Loss of Use (LOU):	S$ ($ 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: $350.00
Total:	**S$** 12,701.45 **Global Sum S$:** 12,250.00	

FINAL PAYMENT Date/Time: Confirm with: Email ☐ Call ☐

Payee 1:	S$ 12,250.00	Name 1:	LEE BROTHERS AUTOMOTIVE PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	