15/5/2010

INS. CASE OWNER:

CC6/AIG20014760/Uga3

LKK:

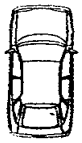
IDAC:

ASSIGNMENT

Surveyor: MARCUS DOI: 30/12/2020 Date / Time : 29/12/2020

Registered in Merimen: 30/12/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : GBJ 8766U

Name of Insured : DAIMLER FLEET MANAGEMENT SINGAPORE PTE. LTD

Insured Tel No. : HP:

Excess Sec II :S$ D.O.A : 12.12.2020

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

If **NO**, Driver Name / Age : CHEAH NGAK HOE

Driver Tel No. : (V/L: YES / NO)

Claim No. :

Policy No. :

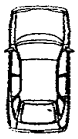
Make / Model : Volkswagen T6 VAN TDI NWB DSG

Place of Accident : Bedok North Rd, Singapore

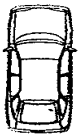
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % **Final ? Yes / No**

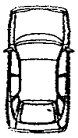
JRN 5114 → → →



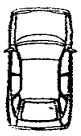
INSRS:
WSP: EROFIA MOTOR
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	JRN 5114 - X GBJ 8766U - 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:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: L/S S$ 1,400.00 (4 days) Reduction: $3,803.70 % 73 Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 14/06/2021 Confirm with LEE LEE Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 31	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 1,400.00	
Loss of Rental (LOR):	S$ (days)	
Loss of Use (LOU):	S$ 120.00 ($ 20 x 6 days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only ☐ LOU only ☑ LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]		
GIA/LTA Search	S$	
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: $320.00
Total:	**S$** 1,520.00 **Global Sum S$:**	

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

Payee 1:	S$ 1,520.00	Name 1:	EROFIA MOTOR TRADING PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	