NOTE: TO BE COMPLETED BY SURVEYOR **TEAM _____**

THIRD PARTY EXPRESS SETTLEMENT
(PAYMENT BREAKDOWN)

Vehicle No:	**GBH5355C (Insd veh)**	**Model:**	**RENAULT LATITUDE 2.0 L DCI AUTO D/AB 4DR (A)**
	SHC5719S (TP veh)		
Date of Accident:	**10/03/2021**		

Global Sum Settlement	:	[X] Yes	[ ] No	
Repair Estimate	: $	**11,147.11**		
Final Repair Cost	: $	1,550.00		
Loss of Use	: $		2.00 days at $50.00 per day	
Rental (if any)	: $		2 days	
LTA / GIA Search Fee	: $			
Others:	: $			
	: $			
Final Settlement Sum (Global Sum)	: $	1,550.00		

Is Third Party Workshop GIA Registered? [ ] YES [X] NO (Kindly indicate below)

A) For **Non GIA Registered Workshop:** Agreed Liability _____100_____(%)

B) For **GIA Registered Workshop:** BOLA Applicable: Yes/ No BOLA Scenario No: ____

BOLA Liability: _____(%) Assessed Liability (*):_____(%)

** Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.*

Remarks _____

_____

Payment Instruction: Payee's Breakdown			
1)	Trans-cab Auto Services Pte Ltd	: $	1,550.00
2)		: $	
3)		: $	
4)		: $	

JOANNE LEE KHANG MIN — 23 Jul 2021

LKK Auto Consultants Pte Ltd — Date

Please attach all the supporting documents to the form.
(Final Repair Bill; Rental Invoice; Release Voucher; Authorisation to Act; Survey Report; Medical Report/ Bill (if any)