15/5/2010

INS. CASE OWNER:

CC4/QBE21005044/Ara3

LKK:

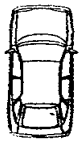
IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 22/04/2021 Date / Time : 22/04/2021

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SLV 9151E Claim No. : VC014472

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

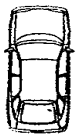
Excess Sec II :S$ D.O.A : 19/04/2021 11:09 Place of Accident : PORTSDOWN AVENUE LEADING INTO AYE

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

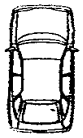
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

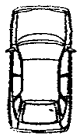
SMP 7909U →



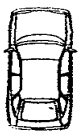
INSRS:
WSP: PREMIUM
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SLV 9151E - X SMP 7909U - 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:	☐
PRELIMINARY ADVICE Date/Time:	Sent By:	Post-Repair Photos:	☐ ☐
		Others:	☐ ☐

FINALIZATION Date/Time: Confirm with: Confirm by: LWP

Repair Cost: P/P S$ 3,816.00 (3 days) Reduction: 33 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 28.03.22 Confirm with NADIA Email ☐ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 4,083.12 OI REAR ENDED TP	
Loss of Rental (LOR):	S$ - (days)	
Loss of Use (LOU):	S$ 180.00 ($ 60 x 3 days)	
Loss of Income (LOI):	S$ - ($ x days)	
LOR only ☐ LOU only ☑ LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]		
GIA/LTA Search	S$ 2.00	
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: $400
Total:	**S$** 4,265.12 **Global Sum S$:**	

FINAL PAYMENT Date/Time: 28.03.22 Confirm with: NADIA Email ☐ Call ☐

Payee 1:	S$ 4,265.12	Name 1:	PREMIUM AUTOMOBILES PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	