

Priya

CC4/III20003242/Kpa3q2-1

INS. CASE OWNER: 6347 6139

LKK:
IDAC:

Re-opened Case

ASSIGNMENT

Surveyor:

KENNETH

DOI: 27/02/2020

Date / Time : 26/02/2020

Registered in Merimen: 26/02/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : GBK 525X

Claim No. : _____

Name of Insured : REEFERTEC PTE LTD

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : ISUZU TFR86JSR-2.5 D (M)

Excess Sec II :S\$ _____ D.O.A : 08/02/2020

Place of Accident : ALONG TUAS ROAD ROUNDABOUT TOWARDS AYE

Is driver the owner? (YES / **NO**) Nature of Accident : _____If NO, Driver Name / Age : OH CHONG GUAN, ROYDEN
(HU CHANGYUAN)
Driver Tel No. : +65-96399870 (V/L: YES / NO)OI GIA REPORT: **YES** / NO ; TP GIA REPORT: **YES** / NO

Insured Liability : % Final ? Yes / No

SDJ 2224H

INSRS:
WSP: OPTIMA
Tel : WERKZ
Liability:
RMKS:INSRS:
WSP:
Tel :
Liability:
RMKS:INSRS:
WSP:
Tel :
Liability:
RMKS:INSRS:
WSP:
Tel :
Liability:
RMKS:

Date/ Time	SDJ 2224H - X	GBK 525X - X	STAGE	DATE / PIC
21/05/2020	Pls refer to Views for details.		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	
	*Reject Case		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:	
17/06/2021	Pls refer to VIEWS for details.			
Reject Case By (staff) : Hsiao Tong Approved by : <i>[Signature]</i> Date : 22-05-20				
PRELIMINARY ADVICE Date/Time: 1.677.75 Sent By: _____ Confirm with: _____ Confirm by: _____ Repair Cost: P/P S\$ 1,587.75 (4 days) Reduction: 20 14% Email ☒ Call ☐ FINAL SETTLEMENT Date/Time: 17/06/2021 Confirm with: Kaitlyn Email ☒ Call ☐ Final Liability: % 50 (Agreed / Assessed) BOLA S/N No. : _____ If NO or B 28, Ass. Lia : _____ Repair Cost: 1,795.19 S\$ 897.60 Loss of Rental (LOR): S\$ _____ (_____ days) Loss of Use (LOU) 240.00 S\$ 120.00 (\$ 60 x 4 days) Loss of Income (LOI): S\$ _____ (\$ _____ x _____ days) LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one] GIA/LTA Search S\$ 7.45 Medical: S\$ _____ Disbursement: S\$ _____ (e.g. Tow/ Independent) Legal Cost S\$ _____ Total: S\$ 1,025.05 Global Sum S\$: 1,000.00 (\$350.00 - \$250.00 = \$100.00) FINAL PAYMENT Date/Time: _____ Confirm with: _____ Email ☒ Call ☐ Payee 1: S\$ 1,000.00 Name 1: Optima Werkz Pte Ltd Payee 2: (Strike if N.A.) S\$ _____ Name 2: _____ Payee 3: (Strike if N.A.) S\$ _____ Name 3: _____				

w/GST