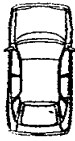


INS. CASE OWNER:

ASSIGNMENTSurveyor: MARCUSDOI: 13/07/2021Date / Time : 13/07/2021

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : SJJ 8213DClaim No. : GA369531Name of Insured : ANG ENG POHPolicy No. : S1M03DJB

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 11/07/2021

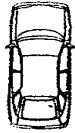
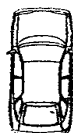
Place of Accident : _____

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**GBK 6531MINSRS:
WSP: FASTECH
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	GBK 6531M - X	SJJ 8213D - 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: <u>LWP</u>	
Repair Cost:	<u>L/S</u> S\$ <u>2,200.00</u> (<u>4</u> days) Reduction: <u>77</u> %		Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: <u>25.11.21</u> Confirm with <u>SHIYING</u>		Email ☐ Call ☐	
Final Liability:	% <u>100</u> (Agreed / Assessed) BOLA S/N No. : <u>27</u>		If NO or B 28, Ass. Lia :	
Repair Cost:	<u>w/GST</u> S\$ <u>2,354.00</u> <u>OI REAR ENDED TP</u>			
Loss of Rental (LOR):	S\$ <u>-</u> (<u> </u> days)			
Loss of Use (LOU):	S\$ <u>240.00</u> (\$ <u>60</u> x <u>4</u> days)			
Loss of Income (LOI):	S\$ <u>-</u> (\$ <u> </u> x <u> </u> days)			
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]				
GIA/LTA Search	S\$ <u>2.00</u>			
Medical:	S\$ <u>-</u>		1) Claim status: Normal/ Reject/Private Settle	
Disbursement:	S\$ <u>-</u> (e.g. Tow/ Independent)		2) Report Format: <u>TP</u>	
Legal Cost	S\$ <u>-</u>		3) Survey fee: <u>\$350</u>	
Total:	S\$ <u>2,596.00</u> Global Sum S\$: <u>2,430.00</u>			
FINAL PAYMENT	Date/Time: <u>25.11.21</u> Confirm with: <u>SHIYING</u>		Email ☐ Call ☐	
Payee 1:	S\$ <u>2,430.00</u> Name 1: <u>FASTECH AUTO PTE LTD</u>			
Payee 2: (Strike if N.A.)	S\$ _____ Name 2: _____			
Payee 3: (Strike if N.A.)	S\$ _____ Name 3: _____			