15/5/2010

INS. CASE OWNER: CC4/GRB21010010/Ega3

LKK:

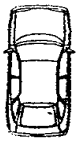
IDAC:

ASSIGNMENT

Surveyor: Steve DOI: 25/10/2021 Date / Time : 27/09/2021

Registered in Merimen: 27/09/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : SLM 9810J Claim No. : MFL2021D0004191

Name of Insured : GRAB RENTALS PTE LTD Policy No. : D21MFL0000447

Insured Tel No. : HP: Make / Model :

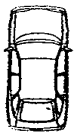
Excess Sec II :S$ D.O.A : 25/09/2021 Place of Accident : Dunearn Rd Near Rochor River

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

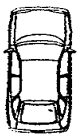
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

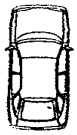
SMU 8370P → → →



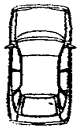
INSRS:
WSP: WEARNES
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SMU 8370P : X ; SLM 9810J : X	**STAGE** **DATE / PIC**
		Non-Reporting ltr (1st):
		Non-Reporting ltr (2nd):
		Non-Reporting ltr (Final):
	CLAIMANT: Murray Christopher William	Notification ltr (if non-pickup):
		Call OI:
		After call ltr to OI:
	TPV: LAND ROVER (1997cc)	**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:
Repair Cost: P/P	S$ $5,965.09 (4 days)	Reduction: $7,695.41 % 56	Email Call
FINAL SETTLEMENT	Date/Time: 31/03/2022	Confirm with CHRISTINE	Email ✓ Cal
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 6,382.65 W/GST		
Loss of Rental (LOR):	S$ 556.40 (4 days)	x $139.10 W/GST	
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ ($ x days)		
LOR only ✓ LOU only	LOR + LOU	LOR + LO [**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: $500.00
Total:	**S$** 6,939.05	**Global Sum S$:**	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ✓ Cal

Payee 1:	S$ 6,939.05	Name 1:	WEARNES AUTOMOTIVE PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	