15/5/2010

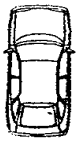
INS. CASE OWNER: ~~CC4/AIG21011892/Bra3~~ | LKK: | IDAC:

ASSIGNMENT CC4/AIG21011892/Bpa3

Surveyor: LTG DOI: 22/11/2021 Date / Time : 23/11/201

Registered in Merimen: 23/11/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : GBH 1157J Claim No. : 5564705069SG

Name of Insured : M-TREE ELECTRICAL PTE LTD Policy No. : 7210103034

Insured Tel No. : HP: Make / Model :

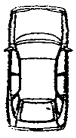
Excess Sec II :S$ D.O.A : 22/11/2021 Place of Accident :

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

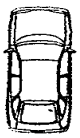
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

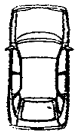
SKS 3957P → → → →



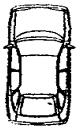
INSRS:
WSP: TEAM AUTOPRO
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SKS 3957P : CC4/LPC19001917/T1db3n2 ; DOA : 26/01/2019	**STAGE** **DATE / PIC**
	GBH 1157J : X	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:
Repair Cost: L/sum	S$ 10,000.00 (14 days) Reduction: 69 %		Email Call
FINAL SETTLEMENT	Date/Time: 28/03/2022	Confirm with Adel	Email ✓ Cal
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 10,700.00		
Loss of Rental (LOR) w/GST	S$ 2,225.60 (16 days)	x $130.00	
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ ($ x days)		
LOR only ✓ LOU only	LOR + LOU	LOR + LO	[**Tick only one**]
GIA/LTA Search	S$ 7.45		
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: $320.00
Total:	**S$** 12,933.05	**Global Sum S$:** 12,900.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ✓ Cal
Payee 1:	S$ 12,900.00	Name 1: Team Autopro Pte Ltd	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	