15/5/2010

INS. CASE OWNER: CC4/GRB21012099/Bga3

LKK:

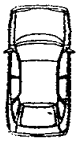
IDAC:

ASSIGNMENT

Surveyor: LTG DOI: 30/11/2021 Date / Time : 29/11/2021

Registered in Merimen: 29/11/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : SLQ 8099G Claim No. : MFL2021D0005226

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

Insured Tel No. : HP: Make / Model :

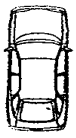
Excess Sec II :S$ D.O.A : 29/11/2021 Place of Accident : AYE TWDS CITY BEF BUONA VISTA EXIT

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

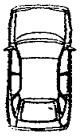
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

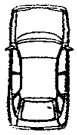
SMQ 5974M → → →



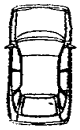
INSRS:
WSP: BIFROST
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SMQ 5974M : X ; SLQ 8099G : X	**STAGE** **DATE / PIC**
		Non-Reporting ltr (1st):
		Non-Reporting ltr (2nd):
		Non-Reporting ltr (Final):
		Notification ltr (if non-pickup):
	CLAIMANT - MOK KAR HOONG, JUSTIN	Call OI:
		After call ltr to OI:
		Documentation Check List: Handler Typist
	TPV: HONDA VEZEL - 1496cc	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/S	S$ 3350.00 (6 days)	Reduction: 7147.15 % 68	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 20/05/2022	Confirm with JR	Email ☑ Cal ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 3,584.50 W/GST		
Loss of Rental (LOR):	S$ 400.00 (4 days)	x $100.00	
Loss of Use (LOU):	S$ 250.00 ($ 50 x 5 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: $500.00
Total:	**S$** 4,241.95	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:		Email ☑ Cal ☐
Payee 1:	S$ 4,241.95	Name 1:	BIFROST AUTO PTE LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:		
Payee 3: (Strike if N.A.)	S$	Name 3:		