15/5/2010

INS. CASE OWNER:

CC4/III21012303/Aga3q2

LKK:

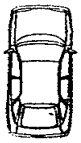
IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 06/12/2021 Date / Time : 06/12/2021

Registered in Merimen: 06/12/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : GBB 9932S

Name of Insured :

Insured Tel No. : HP:

Excess Sec II :S$ D.O.A : 01/12/2021

Is driver the owner? (YES / NO)

Claim No. : MFL2021D0005313

Policy No. : D19MFL0005549_02

Make / Model :

Place of Accident : Bartley Rd East

Nature of Accident :

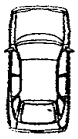
If **NO**, Driver Name / Age :

Driver Tel No. : (V/L: YES / NO)

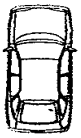
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % **Final ? Yes / No**

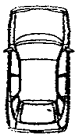
SMP 6553T →



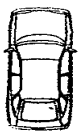
INSRS:
WSP: PROVI AUTOWORKS PTE. LTD.
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SMP 6553T - NBA/INC19019089/Y ; 29.10.2019	
	GBB 9932S - CC6/III15014726/M1ha3n2 ; 22.08.2015	
		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
	CLAIMANT - DEFINE LEASING PTE LTD	LTA / GIA :
		Medical Bill:
	TPV: T.AQUA - 1496cc	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: LS	S$ 3050.00 (4 days)	Reduction: 17432.56 % 85	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 19/07/2022	Confirm with provi	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 3,050.00		
Loss of Rental (LOR):	S$ 400.00 (5 days)	x $80.00	TP PIR AGAINST OI
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ ($ x days)		
LOR only ☑ LOU only ☐	LOR + LOU ☐	LOR + LOI ☐ [**Tick only one**]	
GIA/LTA Search	S$ 36.45		
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: $600.00
Total:	**S$** 3,486.45	**Global Sum S$:** 3,450.00	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 3,450.00	Name 1:	PROVI AUTOWORKS PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	