15/5/2010

INS. CASE OWNER:

CC4/III21012636/ E ea3

LKK:

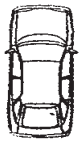
IDAC:

ASSIGNMENT

Surveyor: STEVE CHEN DOI: 15/12/2021 Date / Time : 14/12/2021

Registered in Merimen: 14/12/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : XB 8546U Claim No. : MFL2021D0005611

Name of Insured : Policy No. : D20MFL0004233_01

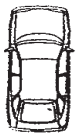
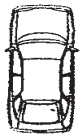
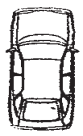
Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 13/12/2021 09:25 Place of Accident : WOODLANDS AVE 2

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**

XB 8546U →	PA 9781A →	motorcycle →	
			
INSRS:	INSRS: WTS ENGINEERING PTE LTD	INSRS:	INSRS:
WSP:	WSP: WOODLANDS TRANSPORT SERVICE PTE. LTD.	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS: OI	RMKS: TP	RMKS:	RMKS:

Date/ Time		
	PA 9781A - CS/CTI20001027/T1td3n2 ; 10/02/2020	
	NBA/CTI20001034/Y ; 13/01/2020	
	XB 8546U - 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: CTY

Repair Cost: L/S S$ 12,800.00 (10 days) Reduction: 29 % Email ☐ Call ☐

FINAL SETTLEMENT	Date/Time: 07.06.22	Confirm with LEEPING	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0%
Repair Cost: w/GST	S$ 13,696.00	3VEH CC OID 2ND	
Loss of Rental (LOR):	S$ - (days)		
Loss of Use (LOU):	S$ 2,640.00 ($ 220 x 12 days)		
Loss of Income (LOI):	S$ - ($ x days)		
LOR only ☐ LOU only ☑	LOR + LOU ☐ LOR + LOI ☐ [**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:	$600
Total:	**S$** 16,343.45	**Global Sum S$:** 16,340.00	

FINAL PAYMENT Date/Time: 07.06.22 Confirm with: LEEPING Email ☐ Call ☐

Payee 1:	S$ 16,340.00	Name 1:	WTS ENGINEERING PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	