15/5/2010

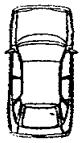
INS. CASE OWNER: KHONG Lynn | CC4/ASM22000500/Apa3 | LKK: IDAC: 245081

ASSIGNMENT

Surveyor: Adrian DOI: 13/01/2022 Date / Time : 13/01/2022

Registered in Merimen: ——

Pre-assign / CCU / FTE



Insured Vehicle No. : . SMT 5110Z Claim No. : S2M03QVQ

Name of Insured : JOEIE LIM LI XIANG Policy No. : GA578184

Insured Tel No. : HP: Make / Model : BMW 523i

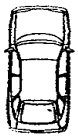
Excess Sec II :S$ D.O.A : 11/01/2022 18:30 Place of Accident : ECP TOWARDS CHANGI

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

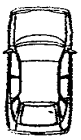
If **NO**, Driver Name / Age : ANDY YEE JUN HONG OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

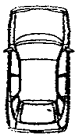
GBD 2765T → → →



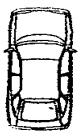
INSRS:
WSP:
Tel :
Liability : JL Perfect Autowork Pte. Ltd.
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	GBD 2765T SMT 5110Z - NA/CTI22000456/m4 ; 11.01.2022	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$ 5,500.00 (6 days) Reduction: 76 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 18/05/2022	Confirm with Irene	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 5,500.00		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 560.00 ($ 80 x 7 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: $350.00
Total:	**S$** 6,096.45	**Global Sum S$:** 6,000.00	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 6,000.00	Name 1:	JL PERFECT AUTOWORK PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	