15/5/2010

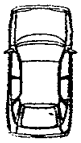
INS. CASE OWNER: KHONG Lynn | CC4/ASM22000914/Aea3 | LKK: IDAC: 246518

ASSIGNMENT

Surveyor: ADRIAN DOI: 07/02/2022 Date / Time : 26/01/2022

Registered in Merimen: ——

Pre-assign / CCU / FTE



Insured Vehicle No. : SND 6362D Claim No. : S2M03RLC

Name of Insured : HO YEW TSENG SHERMAN Policy No. : GA605300

Insured Tel No. : HP: Make / Model : Porsche Panamera

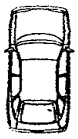
Excess Sec II :S$ D.O.A : 20/01/2022 20:30 Place of Accident : (CHANGI)B4 EXIT 1

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

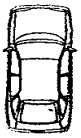
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

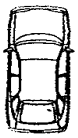
SLX 1299E → → →



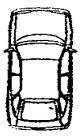
INSRS:
WSP: PROVI AUTOWORKS PTE. LTD.
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SLX 1299E SND 6362D NA/FWD22000773/r3 ; 20.01.2022	**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:	
PRELIMINARY ADVICE	Date/Time: Sent By:	Post-Repair Photos:	
		Others:	

FINALIZATION	Date/Time:	Confirm with:	Confirm by: LWP
Repair Cost: L/S	S$ 5,700.00 (6 days)	Reduction: 78 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 23.06.22	Confirm with	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 36	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 5,700.00	OI LOST CONTROL AND HIT TP	
Loss of Rental (LOR):	S$ 800.00 (8 days)	x $100	
Loss of Use (LOU):	S$ - ($ x days)		
Loss of Income (LOI):	S$ - ($ x days)		
LOR only ☑ LOU only ☐	LOR + LOU ☐ LOR + LOI ☐	[**Tick only one**]	
GIA/LTA Search	S$ -		
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: $350
Total:	**S$** 6,500.00	**Global Sum S$:**	
FINAL PAYMENT	Date/Time: 23.06.22	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 6,500.00	Name 1: PROVI AUTOWORKS PTE. LTD.	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	