15/5/2010

INS. CASE OWNER:

CC4/LPC22003274/Kea3

LKK:

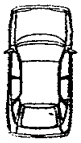
IDAC:

ASSIGNMENT

Surveyor: KENNETH DOI: 11/04/2022 Date / Time : 08/04/2022

Registered in Merimen: ———

Pre-assign / CCU / FTE



Insured Vehicle No. : GBC 4326U Claim No. : 21/22/22/VC00/025658

Name of Insured : Policy No. : Z/21/VC00/111744

Insured Tel No. : HP: Make / Model :

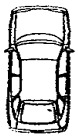
Excess Sec II :S$ D.O.A : 08/04/2022 Place of Accident :

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

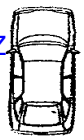
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

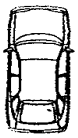
SMH 7091U → → →



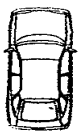
INSRS:
WSP: OPTIMA WERKZ PTE LTD
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SMH 7091U - X	**STAGE** **DATE / PIC**
	GBC 4326U - CC4/LPC21009355/Bes3q2 ; 27/08/2021	Non-Reporting ltr (1st):
	CS/EGI16017458/Uth3q2 ; 14/09/2016	Non-Reporting ltr (2nd):
	NA/INC16017324/r3 ; 14/09/2016	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: KSC
Repair Cost: L/S	S$ 2,650.00 (5 days)	Reduction: 60 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 01.07.22	Confirm with JOSEPH	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 24	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 2,835.50	OID REVERSED OUT OF PARKING LOT HIT TP	
Loss of Rental (LOR):	S$ - (days)		
Loss of Use (LOU):	S$ 420.00 ($ 60 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$ 2.00		
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: $400
Total:	**S$** 3,257.50	**Global Sum S$:**	

FINAL PAYMENT	Date/Time: 01.07.22	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 3,257.50	Name 1:	OPTIMA WERKZ PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	