

Surveyor:

STEVE

DOI:

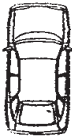
ASSIGNMENT
23/09/2021

CC4/LPC21009904/Epa3q2-1

Date / Time : 22/09/2021

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : GBK 5772R

Claim No. : 21/21/21/VC05/024975

Name of Insured : ACE FRUIT CULTURE

Policy No. : Z21VC05008356

Insured Tel No. : HP:

Make / Model :

Excess Sec II :S\$ D.O.A : 21/09/2021

Place of Accident :

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

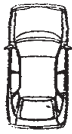
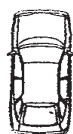
If NO, Driver Name / Age :

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

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

Insured Liability : % Final ? Yes / No

SMW 5847R

INSRS:
WSP: BORNEO
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SMW 5847R : X ; GBK 5772R : X	STAGE DATE / PIC
	- Please check / verify OID DL	Non-Reporting ltr (1st):
		Non-Reporting ltr (2nd):
		Non-Reporting ltr (Final):
11/2/2022	PLEASE REFER TO VIEWS FOR DETAILS	Notification ltr (if non-pickup):
	*SUBMIT WP REPORT AS PER LPC INSTRUCTION	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: P/P	S\$ 16,729.08	(12 days)	Reduction: 6 %	Email ☐	Call ☐
FINAL SETTLEMENT		Date/Time: 06/10/2022	Confirm with: Angela	Email ☐	Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :	
Repair Cost: w/GST	S\$ 17,900.12				
Loss of Rental (LOR):	S\$ 1,300.00	(13 days)	x \$100		
Loss of Use (LOU):	S\$ (\$ x days)				
Loss of Income (LOI):	S\$ (\$ x days)				
LOR only ☐	LOU only ☐	LOR + LOU ☐	LOR + LO ☐	[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: \$400.00- \$350.00 = \$50.00			
Total:	S\$ 19,202.12	Global Sum S\$:			
FINAL PAYMENT		Date/Time:	Confirm with:	Email ☐	Call ☐
Payee 1:	S\$ 19,202.12	Name 1:	BORNEO MOTORS (S) PTE LTD		
Payee 2: (Strike if N.A.)	S\$	Name 2:			
Payee 3: (Strike if N.A.)	S\$	Name 3:			