15/5/2010

			LKK:
INS. CASE OWNER:		CC4/III22007701/Apa3q2	IDAC:

ASSIGNMENT

Surveyor: **ADRIAN** DOI: 12/08/2022 Date / Time : 12/08/2022

Registered in Merimen: 14/08/2022

Pre-assign / CCU / FTE

Insured Vehicle No. : **FBT 9005Z** Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 05/08/2022 13:48 Place of Accident: ALONG JALAN BUKIT MERAH FILTERING ROAD TOCTE

TOWARDS OPPOSITE BLK 132 TIONG BAHRU

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**

SLS 6939K → → →

INSRS: INSRS: INSRS: INSRS:
WSP: **PREMIUM** WSP: WSP: WSP:
Tel : Tel : Tel : Tel :
Liability : Liability : Liability : Liability :
RMKS: RMKS: RMKS: RMKS:

Date/ Time		
SLS 6939K - Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By		
CC3/AIG19020615/Avd3n2 09/03/2020 SLS 6939K 18/11/2019 10/03/2020 NVT		
FBT 9005Z - X		

	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:

Repair Cost: **P/P** S$ 1,872.00 (3 days) Reduction: 72 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time:19/04/2023 Confirm with: **SITI** Email ✓☐ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27 If NO or B 28, Ass. Lia :

Repair Cost: **8% GST** S$ 2,021.76

Loss of Rental (LOR): S$ (days)

Loss of Use (LOU): S$180.00 ($ 60 x 3 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: **$350.00**

Total: S$ 2,209.21 **Global Sum S$:**

FINAL PAYMENT Date/Time: Confirm with: Email ✓☐ Call ☐

Payee 1: S$ 2,209.21 Name 1: **Premium Automobiles Pte Ltd**

Payee 2: (Strike if N.A.) S$ Name 2:

Payee 3: (Strike if N.A.) S$ Name 3: