15/5/2010

INS. CASE OWNER: TEO Kitty | CC4/ASM22009511/Apa3 | LKK: IDAC: 284348

ASSIGNMENT

Surveyor: ADRIAN DOI: 27/09/2022 Date / Time : 27/09/2022

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : SGN 1645B Claim No. : S2M049RV

Name of Insured : LEONG JIA HUI,NICHOLAS Policy No. : GA565305

Insured Tel No. : HP: Make / Model : Audi A6

Excess Sec II :S$ D.O.A : 21/08/2022 21:40 Place of Accident : ORCHARD ROAD TOWARDS PLAZA SING

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**

GBE 2646Z → → →

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

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
GBE 2646Z - Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By	
CC3/AIG15022420/H1wb3q2 04/05/2017 SHD 4758E GBE 2646Z 29/12/2015 09/05/2017 LSP	
SGN 1645B - X	

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: L/Sum S$ 2,750.00 (4 days) Reduction: 71 % Email [ ] Call [ ]

FINAL SETTLEMENT Date/Time: 19/04/2023 Confirm with IRENE Email [✓] Call [ ]

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 100
Repair Cost:	S$ 2,750.00	
Loss of Rental (LOR):	S$ 280.00 (4 days) $70	
Loss of Use (LOU):	S$ ($ x days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only [✓] LOU only [ ] LOR + LOU [ ] LOR + LOI [ ] [**Tick only one**]		
GIA/LTA Search	S$ 38.45	
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: $350.00
Total:	**S$** 3,068.45 **Global Sum S$:** 3,060.00	

FINAL PAYMENT Date/Time: Confirm with: Email [✓] Call [ ]

Payee 1:	S$ 3,060.00	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:	