

INS. CASE OWNER:

ASSIGNMENT

Surveyor: _____

DOI: 11/04/2018

Date / Time : _____

Registered in Merimen: _____

Pre-assign / CCU / FTE

Insured Vehicle No. : YP 7300H

Claim No. : SNM18D00450C02/0

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: 15/11/2017

Make / Model : MITSUBISHI

Excess Sec II :S\$ _____ D.O.A : _____

Place of Accident : JURONG EAST ST 11

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**

PA 8647L

INSRS:
WSP: SC AUTO
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		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:	☐
		Post-Repair Photos:	☐ ☐
		Others:	☐ ☐
PRELIMINARY ADVICE	Date/Time: _____	Sent By: _____	
FINALIZATION	Date/Time: _____	Confirm with: _____	Confirm by: MRB
Repair Cost: P/P S\$ 2,580.00	(2 days) Reduction: 17 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 27.07.20	Confirm with MEILIN	Email ☐ Call ☐
Final Liability: % 100	(Agreed / Assessed) BOLA S/N No. : 15	If NO or B 28, Ass. Lia :	
Repair Cost: w/GST S\$ 2,760.60	OID CHANGED LANE HIT TP		
Loss of Rental (LOR): S\$ -	(- days)		
Loss of Use (LOU): S\$ 540.00	(\$ 180 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\$ 2.00		
Medical:	S\$ -	1) Claim status: Normal/ Reject/Private Settle	
Disbursement:	S\$ -	2) Report Format: TP	
Legal Cost	S\$ -	3) Survey fee: \$400	
Total:	S\$ 3,330.26	Global Sum S\$: 3,330.00	
FINAL PAYMENT	Date/Time: 27.07.20	Confirm with: MEILIN	Email ☐ Call ☐
Payee 1:	S\$ 3,330.00	Name 1: SC AUTO INDUSTRIES (S) PTE LTD	
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	