15/5/2010

INS. CASE OWNER: KASHIDAH | CC 3 /AIG1800 4390, 5463 | LKK: | IDAC:

Surveyor: Kenneth. | **ASSIGNMENT** DOI: 06/01/18 | Date / Time : 6/7/18 | Registered in Merimen: 7/7/18

Pre-assign / CCU / FTE

Insured Vehicle No. : SLB 5910M | Claim No. : 539845756354

Name of Insured : RICHARD LEONG PENG FEONG | Policy No. :

Insured Tel No. : | HP: | Make / Model : MINZDA

Excess Sec II :S$ | D.O.A : 01/01/18 | Place of Accident : CHANGI RD

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

If NO, Driver Name / Age : LEONG YONG ANN BRYNE | OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

SHD 9777S → | → | →

INSRS:	INSRS:	INSRS:	INSRS:
WSP:	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS: Trans Cab.	RMKS:	RMKS:	RMKS:

Date/ Time	
6/7/18	SHD9777S - X SLB5910M - Y
	- FINALISED
7TH	- ORIGINAL TP LOG IN
19/12/18	- FILE REQUESTED. CONFLICTING VERSIONS. OIC REPORTED TP DRIVE OUT FROM STOP LINE. TP REPORTED HE WAS STATIONARY. SEND LETTER TO EMAIL TO OI TO NOTIFY TP CLAIM TO NCD ISSUES.
28/05/19	- AIG INSTRUCTED TO REBOOT TP CLAIM.
	- EMAIL TO TP TO REBOOT CLAIM
	- TO CLOSE.

Reject Case
By (staff) : VIC
Approved by : Yen
Date : 28/05/19

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:	19/12/18 - VIC

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: LG S$ 4,400.00 (3 days) Reduction: 81 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: Confirm with Email ☐ Call ☐

Final Liability:	% 0% (Agreed / Assessed) BOLA S/N No. : 10a	If NO or B 28, Ass. Lia :
Repair Cost:	S$ -	
Loss of Rental (LOR):	S$ - (days) X$101.46	REBOOT TP CLAIM TP FROM CHANGI RD
Loss of Use (LOU):	S$ - ($ x days)	
Loss of Income (LOI):	S$ - ($ x days)	
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S$ 7.49	
Medical:	S$ -	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ - (e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ -	3) Survey fee: $320.00
Total:	**S$** **Global Sum S$:**	

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

Payee 1:	S$ -	Name 1:	-
Payee 2: (Strike if N.A.)	S$ -	Name 2:	-
Payee 3: (Strike if N.A.)	S$ -	Name 3:	-