

INS. CASE OWNER:

TE

CC 4, Asm 1800 4563, K1pa3

LKK:

IDAC:

34317

Surveyor:

Amc

DOI:

ASSIGNMENT

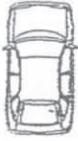
9/3/18

Date / Time :

9.3-18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

SJH 50700

Claim No. :

S8m00Ae1

Name of Insured :

Policy No. :

Insured Tel No. :

HP:

613/18

Make / Model :

Excess Sec II :SS

D.O.A :

Place of Accident :

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

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

Insured Liability :

%

Final ? Yes / No

SHL 8633E



INSRS:

WSP:

Tel :

Liability :

RMKS:

Trans-Cab



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:	12/3/18	Sent By:	Am
FINALIZATION	Date/Time:		Confirm with:	
Repair Cost:	S\$	() days	Reduction:	%
			Email	☐ Call ☐
FINAL SETTLEMENT	Date/Time:		Confirm with:	
Final Liability:	%	(Agreed / Assessed)	BOLA S/N No. :	
Repair Cost:	S\$			
Loss of Rental (LOR):	S\$	() days		
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\$			
Medical:	S\$			
Disbursement:	S\$	(e.g. Tow/ Independent)		
Legal Cost	S\$			
Total:	S\$		Global Sum S\$:	
FINAL PAYMENT	Date/Time:		Confirm with:	
Payee 1:	S\$		Name 1:	
Payee 2: (Strike if N.A.)	S\$		Name 2:	
Payee 3: (Strike if N.A.)	S\$		Name 3:	

