

15/5/2010

INS. CASE OWNER:

CC6 /AIG1800 5660, 4W03

LKK:

IDAC:

Surveyor:

marcus

DOI:

ASSIGNMENT

27/7/18

Date / Time :

27/3/18

Registered in Merimen:

27/3/18

Pre-assign / CCU / FTE



Insured Vehicle No. :

SGZ 6304P

Name of Insured :

VIN Famy

Insured Tel No. :

HP: 96468093

Excess Sec II :\$S

D.O.A: 25/7/18

Is driver the owner?

(YES / NO)

Nature of Accident :

Claim No. :

262141138054

Policy No. :

2100371353-04

Make / Model :

MERCEDES

Place of Accident :

on op merrymount rd k
amk blc 1

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

SLV 9646U



INSRS:

WSP:

Tel :

Liability :

RMKS:

pegasus



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

27/3/18

vit

2/5/2018 polkin

2:50pm

3/5/2018

4/5/2018

4/5/2018

12:15 am

02/05/18

04/05/18

08/05/18

SLV 9646U + SGZ 6304P - X

- FINANCIAL

call OI at 96468093, but no body pick-up. tomorrow

will call again

call again, still no body pick-up

10:15 am, still no body pick-up

OI call back, OI confirmed accident statement. Informed her

about the TP claim and HCD issue. OI agreed to settle and

advise the HCD issue and mention she has HCD protector.

Send letter to OI.

- BOUND LIABILITY CLERK.

- TP LOB IN BY BOUND.

- GROUND 1ST OFFER TO TP.

- TP ACCEPTED OFFER.

- ALL BOGS IN ORDER.

- TO CLOS.

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:

Repair Cost: PIP

SS 2,740.40

(3 days)

Reduction:

46 %

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with:

Email

Call

Final Liability:

SS 100

(Agreed / Assessed)

BOLA S/N No. :

27

If NO or B 28, Ass. Lia :

Repair Cost: (W/LOD)

SS 2,962.23

(OI RATE - ENBEO TP)

Loss of Rental (LOR):

SS

(days)

Loss of Use (LOU):

SS 440.00

(\$110 x 4 days)

CORR MTR & 66.95 + 100000

Loss of Income (LOI):

SS

(\$ x days)

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

SS 7.49

Medical:

SS

Disbursement:

SS

(e.g. Tow/Independent)

Legal Cost

SS

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

4320.00

Total:

SS 3,379.72

Global Sum SS:

3,370.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

SS 3,370.00

Name 1:

PEGASUS ENGINEERING & TRADING PTE LTD

Payee 2: (Strike if N.A.)

SS

Name 2:

Payee 3: (Strike if N.A.)

SS

Name 3: