INS. CASE OWNER:

CC 6 /AIG1800 8477 /Ag63

LKK:
IDAC:

ASSIGNMENT

Surveyor: Adrian DOI: 8/5/18 Date / Time: 8/5/18
Registered in Merimen: 8/5/18

Pre-assign / CCU / FTE

Insured Vehicle No.: SLL 5710X
Name of Insured: ZHANG ZHENYANG.
Insured Tel No.: HP: 96860715
Excess Sec II :S$
D.O.A: 7/5/18
Is driver the owner? (YES / NO)
Nature of Accident:
If NO, Driver Name / Age:
Driver Tel No.: (V/L: YES / NO)

Claim No.: 5956HY69905G
Policy No.:
Make / Model: MAZDA
Place of Accident: ATTAP VALLEY RD
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO
Insured Liability: % Final ? Yes / No

GBF 2693L →

INSRS:
WSP: J-mart
Tel:
Liability:
RMKS:

Date/ Time	
11/5/18 NG	[illegible]
23/5/2018	Call OI at 9584 0515 but no body pick-up.
23/5/2018	Call OI again at 9584 0515 have been told this number not belong to our OI. liability is clear, send letter to OI.
	- phone number wrong, Address wrong, Email letter to OI.
14/5/2018	OI call in, intend to do private settlement (J-mart), update OI when surveyor finalize with TP workshop. [illegible]
	[illegible] 27, Front to rear, 100%.
	P. LOD
3-10-18	@1015 CALLED OI NO ANSWER
3-10-18	@1148 OI CALLED. WILL LET AIG SETTLE.

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	[illegible] [illegible]
After call ltr to OI:	[illegible] 23/5

Documentation Check List:	Handler	Typist
Notification ltr (if non-pickup): X		
After call ltr to OI:	/	
Authorisation To Act:	/	
Release Voucher:	/	
Final Repair Bill:	/	
Car Rental Invoice:	/	
Towing Invoice: X		
LTA / GIA: X		
Medical Bill: X		
PIR: X		
Mandate/Reject Instruction: X		
LOD		
Payment Breakdown Form:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:
Repair Cost: S$ (days) Reduction: % Email [ ] Call [ ]

FINAL SETTLEMENT Date/Time: 3-10-18 Confirm with: ANGIE Email [ ] Call [ ]

Final Liability:	% 100% (Agreed / Assessed) BOLA S/N No.: 27	If NO or B 28, Ass. Lia: Front to rear collision
Repair Cost: GST	S$ 4,066	
Loss of Rental (LOR):	S$ xxxxx (xxx days) xxxx	
Loss of Use (LOU):	S$ 700.00 ($ 100 x 7 days)	COPY SENT 4/10/18
Loss of Income (LOI):	S$ ($ x days)	
LOR only [ ] LOU only [ ] LOR + LOU [ ] LOR + LOI [ ] [Tick only one]		
GIA/LTA Search	S$ –	
Medical:	S$ –	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ – (e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$	3) Survey fee:
Total:	**S$** 4,766 **Global Sum S$:**	

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

Payee 1:	S$ 4,766.xx	Name 1:	J-MART MOTOR PTE LTD
Payee 2: (Strike if N.A.)	S$ ×	Name 2:	/
Payee 3: (Strike if N.A.)	S$	Name 3:	