15/5/2010

INS. CASE OWNER: NORSIAH | CC 4 / AIG 180 10501 / Kha3 | I.Y.K: | IDAC:

ASSIGNMENT

Surveyor: Kenneth   DOI: 13-6-18   Date / Time: 7/6/18

Registered in Merimen: 8/8/18 NH

Pre-assign / CCU / FTE

Insured Vehicle No. : SLE 9427 A   Claim No. : 41922130485603

Name of Insured : CAR COVE LEASING P/L   Policy No. : 31007220

Insured Tel No. : ________ HP: Make / Model : T-AX10

Excess Sec II :S$ ________ D.O.A : 25/5/2018   Place of Accident : Rendemeer Rd

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

If **NO**, Driver Name / Age : Randhawa Amrita Kaur   OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : 92329495 (V/L: YES / NO)   Insured Liability : %   **Final ? Yes / No**

SGC924K → ________ → ________ → ________

INSRS:
WSP: RH Auto.
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
7/6 VIC	SGC924K / SLE9427A } NBA/AIG/18009643/V ; DOA: 25/5/18
	- TP VIDEO IN. V DRIVE/VIC/SGC 924K
	- UPLOADED IN MERIMEN
09/07/18@3PM	- SPOKE TO OID. CONFIRMED ACCIDENT DETAILS. INSISTED TP CUT LANE. INFORMED HER OF TP CLAIM. SHE SAID SHE HAVE FOOTAGE & PROVIDED TO THE WORKSHOP. SEND LETTER & EMAIL TO OID TO REQUEST VIDEO FOOTAGE.
18/07/18	- OI VIDEO IN. SAVE IN V DRIVE/VIC/SLE9427A
	- OI WITHIN LANE, TP CHANGED LANE.
	- UPLOADED IN MERIMEN.
20/07/18	- EMAIL TO AIG FOR REJECTION.
	- AIG AGREED TO REJECT CLAIM.
	- EMAIL TO TP TO REJECT CLAIM.
	- TO CLOSE & SUBMIT WP REPORT.

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:	09/07/18 - 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:		

Reject Case
By (staff) : VC
Approved by :
Date : 25/07/18

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: (AMOUNT) S$ 640.00 (2 days) Reduction: 84 % Email ☐ Call ☐

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

Final Liability:	% (Agreed / Assessed) BOLA S/N No. :	If NO or B 28, Ass. Lia :
Repair Cost:	S$ —	
Loss of Rental (LOR):	S$ — (days)	"REJECT TP CLAIM"
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$ —	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:	—