

15/5/2010

INS. CASE OWNER:

CC 3 /AIG1801

5106,

elb

LKK:
IDAC:**ASSIGNMENT**

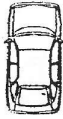
Surveyor: _____

DOI: _____

Date / Time: _____

Registered in Merimen: _____

Pre-assign / CCU / FTE



Insured Vehicle No. :

SFW 1996C

Name of Insured :

SIAM NOW FOUN.

Insured Tel No. :

HP: _____

Excess Sec II :\$S

D.O.A: _____

Is driver the owner? (YES / ☒ NO)

Nature of Accident : _____

If NO, Driver Name / Age : _____

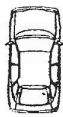
HAR YIKE WEI

Driver Tel No. :

(V/L: ☒ YES / NO)OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NO

Insured Liability : % Final ? Yes / No

SGG 9777m.



INSRS:

WSP: _____

Tel: _____

Liability: _____

RMKS: _____



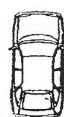
INSRS:

WSP: _____

Tel: _____

Liability: _____

RMKS: _____



INSRS:

WSP: _____

Tel: _____

Liability: _____

RMKS: _____



INSRS:

WSP: _____

Tel: _____

Liability: _____

RMKS: _____

Date / Time	STAGE	DATE / PIC
21/8/18	Non-Reporting ltr (1st):	
21/8/18	Non-Reporting ltr (2nd):	
21/8/18	Non-Reporting ltr (Final):	
21/8/18	Notification ltr (if non-pickup):	
21/8/18	Call OI:	
21/8/18	After call ltr to OI:	
21/8/18	Documentation Check List: Handler Typist	
21/8/18	Notification ltr (if non-pickup)	
21/8/18	After call ltr to OI:	
21/8/18	Authorisation To Act:	
21/8/18	Release Voucher:	
21/8/18	Final Repair Bill:	
21/8/18	Car Rental Invoice:	
21/8/18	Towing Invoice:	
21/8/18	LTA / GIA :	
21/8/18	Medical Bill:	
21/8/18	PIR:	
21/8/18	Mandate/Reject Instruction:	
21/8/18	LOD	
21/8/18	Payment Breakdown Form:	
21/8/18	Post-Repair Photos:	
21/8/18	Others:	
21/8/18	PRELIMINARY ADVICE Date/Time: Sent By:	
21/8/18	FINALIZATION Date/Time: Confirm with:	
21/8/18	Repair Cost: \$S (days) Reduction: % Email ☐ Call ☐	
21/8/18	FINAL SETTLEMENT Date/Time: Confirm with:	
21/8/18	Final Liability: % (Agreed / Assessed) BOLA S/N No. :	
21/8/18	Repair Cost: \$S	
21/8/18	Loss of Rental (LOR): \$S (days)	
21/8/18	Loss of Use (LOU): \$S (S x days)	
21/8/18	Loss of Income (LOI): \$S (S x days)	
21/8/18	LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LO ☐ [Tick only one]	
21/8/18	GIA/LTA Search \$S	
21/8/18	Medical: \$S	
21/8/18	Disbursement: \$S (e.g. Tow/ Independent)	
21/8/18	Legal Cost \$S	
21/8/18	Total: \$S Global Sum \$S:	
21/8/18	FINAL PAYMENT Date/Time: Confirm with:	
21/8/18	Payee 1: \$S Name 1: _____	
21/8/18	Payee 2: (Strike if N.A.) \$S Name 2: _____	
21/8/18	Payee 3: (Strike if N.A.) \$S Name 3: _____	