es3

15/5/2010

INS. CASE OWNER: CC 4/AIG1802 3177 /F7 /// | LKK: | IDAC:

ASSIGNMENT

Surveyor: Kalvin   DOI: 08/10/18   Date / Time : 27/10/18

Registered in Merimen: 27/10/18

Pre-assign / CCU / FTE

Insured Vehicle No. : SJB 8662H		Claim No. :	
Name of Insured :		Policy No. :	
Insured Tel No. :	HP:	Make / Model :	
Excess Sec II :S$	D.O.A : 25/12/18	Place of Accident :	
Is driver the owner? (YES / NO)	Nature of Accident :		
If **NO**, Driver Name / Age :		OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO	
Driver Tel No. :	(V/L: YES / NO)	Insured Liability : %	**Final ? Yes / No**

SHC 7042Y → → →

INSRS: CDGE WSP: ws Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SHC7042Y - Y SJB8662H - Y

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: AWK
Repair Cost: P/P	S$ 4,014.00	(4 days) Reduction: 63 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 08.09.20	Confirm with AILEEN	Email ☐ Call ☐
Final Liability: 100	% 80	(Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost w/GST: $4,294.98	S$ 3,435.98		
Loss of Rental (LOR) $460.00	S$ 368.00	(4 days) X $115	
Loss of Use (LOU): -	S$ -	($ x days)	
Loss of Income (LOI) $200.00	S$ 160.00	($ 50 x 4 days)	
LOR only ☐ LOU only ☐	LOR + LOU ☐	LOR + LOI ☐ **[Tick only one]**	
GIA/LTA Search $7.49	S$ 7.49		
Medical: -	S$ -		1) Claim status: Normal/[illegible]
Disbursement: -	S$ -	(e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost -	S$ -		3) Survey fee: $320
Total: $4,962.47	S$ 3,971.47	**Global Sum S$:** 4,000.00	
FINAL PAYMENT	Date/Time: 08.09.20	Confirm with: AILEEN	Email ☐ Call ☐
Payee 1:	S$ 4,000.00	Name 1: COMFORTDELGRO ENGINEERING PTE LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	