

15/5/2010

INS. CASE OWNER:

ACWIN

CC b/AIG1900

LKK:

IDAC:

Surveyor:

x62

DOI:

ASSIGNMENT

18/1/19

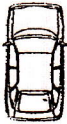
Date / Time:

18/1/19

Registered in Merimen:

11/1/19

Pre-assign / CCU / FTE



Insured Vehicle No.:

SEP 1459P

Claim No.:

87NB H64H4054

Name of Insured:

WONG YIK SHUN @ WONG YIM HOI

Policy No.:

70028588-04

Insured Tel No.:

HP: 87674942

Make / Model:

Toyota

Excess Sec II : \$\$

D.O.A.: 18/1/19

Place of Accident:

up blk 317 Rmk Ave 3

Is driver the owner?

(YES / NO)

Nature of Accident:

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

SEP 7051A



INSRS:

WSP:

Tel:

Liability:

RMKS:

NPH



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time		STAGE	DATE / PIC
18/1/19	SEP 7051A - X	Non-Reporting ltr (1st):	
PM	SEP 1459P - X	Non-Reporting ltr (2nd):	
	TP LOD IN BY EMAIL	Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	
02/02/19	SEND 1st OFFER TO TP.	After call ltr to OI:	18/02/19 - SHUN - 04
	TP ACCEPTED OFFER.	Documentation Check List:	Handler Typist
	ALL BOOK IN ORDER.	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:
Repair Cost:	P/P	SS \$3,114.70	(4 days) Reduction: 10 %
FINAL SETTLEMENT		Date/Time:	Confirm with:
Final Liability:	%	100	(Agreed / Assessed) BOLA S/N No. : N/L
Repair Cost: (w/loss)	SS	3,002.19	
Loss of Rental (LOR):	SS	-	(days)
Loss of Use (LOU):	SS	600.00	\$60 x 5 days
Loss of Income (LOI):	SS	-	(\$ x days)
LOR only ☐ LOU only ☒	LOR + LOU ☐	LOR + LO ☐	[Tick only one]
GIA/LTA Search	SS	200	
Medical:	SS	-	
Disbursement:	SS	-	(e.g. Tow/ Independent)
Legal Cost	SS	-	
Total:	SS	3,634.19	Global Sum SS: 3,600.00
FINAL PAYMENT		Date/Time:	Confirm with:
Payee 1:	SS	3,600.00	Name 1: NPH AUTO SERVICE
Payee 2: (Strike if N.A.)	SS	-	Name 2: -
Payee 3: (Strike if N.A.)	SS	-	Name 3: -