15/5/2010

INS. CASE OWNER: KWAN MENG | CC 6 / AIG 1900 1490 / Kja3 | LKK: | IDAC:

ASSIGNMENT

Surveyor: KSL

DOI: 23/1/19

Date / Time: 23/01/19

Registered in Merimen: 23/01/19

Pre-assign / CCU / FTE

Insured Vehicle No. :	SKB7070K	Claim No. :	0673203148 0G
Name of Insured :	CHEAH POH MENG	Policy No. :	
Insured Tel No. :		HP:	
Make / Model :			
Excess Sec II :S$		D.O.A : 22/1/19	Place of Accident :

Is driver the owner? (YES / NO) — NO circled

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**

SLZ 9372M →

INSRS: WSP: Optima Werk Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
nil joy	SLZ9372M - X ; SKB7070K - X
	- MANDATED
24-1-19	@320 CALLED - NO ANS.
	- SEND LETTER TO OI.
01/07/19	- SEEK MANDATE IN MERIMEN
04/07/19	- AIG APPROVED MANDATE
	- SEND 1st OFFER TO TP.
	- TP ACCEPTED OFFER. ALL DOCS IN ORDER.
27-5-19	LOD IN. FOR MANDATE
1/7/19	Ltr sent to OI

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:	01/07/19 - Sunny

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:

Repair Cost: 181 S$ 9,263.48 (5 days) Reduction: 14 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 04/07/19 Confirm with LILY Email ✓ Call ☐

Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: GST	S$ 9,911.92	VIDEO	OID HIT PARKED VEHICLES
Loss of Rental (LOR): GST	S$ 856	(8 days) 100	
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$ 2.xx		
Medical:	S$ —		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ —	(e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ —		3) Survey fee: $320.00
Total:	S$ 10,769.92	**Global Sum S$:** 10,750.00	

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

Payee 1:	S$ 10,750.00	Name 1:	OPTIMA WERKZ PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—