15/5/2010

INS. CASE OWNER: NORSIAH | CC 6, AIG 1900 3586, A7a3 | LKK: | IDAC:

ASSIGNMENT

Surveyor: Unp | DOI: 28/2/19 | Date / Time: 28/2/19 | Registered in Merimen: 26/7/19

Pre-assign / CCU / FTE

Insured Vehicle No.:	SJR 1798L	Claim No.:	7979 4098485G
Name of Insured:	Tay Kang Poh	Policy No.:	
Insured Tel No.:	HP:	Make / Model:	
Excess Sec II :S$	D.O.A: 21/2/19	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**

PRI

WB 6718U → SJR 1798L → SKN 902T →

INSRS:	INSRS:	INSRS:	INSRS:
WSP:	WSP:	WSP: MG Solution	WSP:
Tel:	Tel:	Tel:	Tel:
Liability:	Liability:	Liability:	Liability:
RMKS:	RMKS: OI	RMKS: TP	RMKS:

Date/ Time	
1/7	SKN902T / SJR1798L } NA1011950336013 : DOA: 21/2/19
joy	
	- FINALIZED
	- TP LOD IN BY EMAIL
	- FILE REVIEWED. OI INVOLVED IN A 3 VEH. C.C. & WAS THE 2ND CAR. LAST CAR IS FOREIGN REGISTERED. SEND LETTER TO OI.
12/07/19	- SEND 1ST OFFER TO TP.
15/07/19	- TP ACCEPTED OFFER.
	- ALL DOCS IN ORDER
	- TO CLOSE.

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:	12/07/19 - JC

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: L/S S$ 5,700.00 (7 days) Reduction: 66 % Email [ ] Call [ ]

FINAL SETTLEMENT	Date/Time: 16/07/19 Confirm with GV WONG	Email ✓ Call [ ]
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No.: 28b(ii)	If NO or B 28, Ass. Lia: 0%
Repair Cost: (w/GST)	S$ 6,099.00	(3 VEH. C.C.)
Loss of Rental (LOR):	S$ — (days)	TP - 1ST
Loss of Use (LOU):	S$ 900.00 ($100 x 9 days)	OI - 2ND
Loss of Income (LOI):	S$ — ($ x days)	NALAYKAN - 3RD
LOR only [ ] LOU only [✓] LOR + LOU [ ] LOR + LOI [ ] [Tick only one]		
GIA/LTA Search	S$ 7.45	
Medical:	S$ —	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ — (e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ —	3) Survey fee: $320.00
Total:	S$ 7,006.45 **Global Sum S$:** —	

FINAL PAYMENT	Date/Time:	Confirm with:	Email [ ] Call [ ]
Payee 1:	S$ 7,006.45	Name 1:	MG SOLUTION PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—