

15/9/2010

INS. CASE OWNER:

LOH CHH HONG

CC 4/AIG1900 8907, h 43

LKK:

IDAC:

ASSIGNMENT

Surveyor:

DOI:

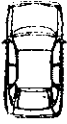
Date / Time:

17/5/10

Registered in Merimen:

17/5/10

Pre-assign / CCU / FTE



Insured Vehicle No.:

SGL 3930 A

Claim No.:

564705711666

Name of Insured:

Lim Han

Policy No.:

1800038429

Insured Tel No.:

HP:

Make / Model:

KIA

Excess Sec II :SS

D.O.A.:

16/6/10

Place of Accident:

SLE B4 SEMBANG PULOK.

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO. Driver Name / Age: LEE PHU' KUAN'

OI GIA REPORT: YES / NO : TP GIA REPORT: YES / NO

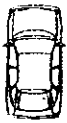
Driver Tel No.:

(V/L: YES / NO)

Insured Liability: %

Final ? Yes / No

GBE AA7H



INSRS:

WSP:

Tel:

Liability:

RMKS:

WSP: HONG
Tel: HONG
Liability: HONG
RMKS: HONG

INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time	STAGE	DATE / PIC
17/5/10 11:30AM	Non-Reporting ltr (1st):	
	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
	Call OI:	
	After call ltr to OI:	05/11/10 - JIC
	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:
Repair Cost:	\$S	(days) Reduction: %
FINAL SETTLEMENT	Date/Time:	Confirm with:
Final Liability:	%	(Agreed / Assessed) BOLA S/N No.:
Repair Cost:	\$S	
Loss of Rental (LOR):	\$S	(days)
Loss of Use (LOU):	\$S	(S x days)
Loss of Income (LOI):	\$S	(S x days)
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LO ☐		[Tick only one]
GIA/LTA Search	\$S	
Medical:	\$S	
Disbursement:	\$S	(e.g. Tow/ Independent)
Legal Cost	\$S	
Total:	\$S	Global Sum \$S:
FINAL PAYMENT	Date/Time:	Confirm with:
Payee 1:	\$S	Name 1:
Payee 2: (Strike if N.A.)	\$S	Name 2:
Payee 3: (Strike if N.A.)	\$S	Name 3: