15/5/2010

INS. CASE OWNER: SALIHA | CC 4/AIG1900 9414 , T2 663/2 | LKK: IDAC:

ASSIGNMENT

Surveyor: Tantick. DOI: 28/5/19. Date / Time: 27/5/19
Registered in Merimen: 28/5/19.

Pre-assign / CCU / FTE

Insured Vehicle No. :	SMH 418.	Claim No. :	746477881634
Name of Insured :	FOH ENG GHEE	Policy No. :	1900010642
Insured Tel No. :	HP:	Make / Model :	MAZDA
Excess Sec II :S$	D.O.A : 27/5/19.	Place of Accident :	T-JUNC BTW SEKANGOON NORTH AVE 3 & AVE 4
Is driver the owner? (YES / NO)	Nature of Accident :		

If **NO**, Driver Name / Age : NG FENNY
Driver Tel No. : (V/L: YES / NO)
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO
Insured Liability : % **Final ? Yes / No**

SGA 741L → → →

INSRS: WSP: Teamwork Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SGA741L / SMH418B } Teamwork 1900917164 DOA: 27/5/19
	- OID TO PROVE GREEN ARROW ON HER FAVOUR.
17/6/19, 10.30am	Called OZB to inform TP claim
	- OID NO EVIDENCE
	- TO FINALISE OOR
	- FINALISED
	- ORIGINAL TP LOD IN
07/10/19	- TYPE REPORT FOR MANDATE APPROVAL
	- REPORT DONE
07/12/19	- SEEK MANDATE TO AIG
11/12/19	- AIG APPROVED MANDATE
12/12/19	- SEND 1ST OFFER TO TP.
	- 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:	17/06/19 - SIMMY

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: LG	S$ 10,000.00 (10 days) Reduction: 82 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 12/12/19	Confirm with TRICIA	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 9a		If NO or B 28, Ass. Lia : (OID TURNING)
Repair Cost: (w/GST)	S$ 10,700.00		
Loss of Rental (LOR):	S$ 1,300.00 (13 days) x $100.00		
Loss of Use (LOU):	S$ — ($ x days)		
Loss of Income (LOI):	S$ — ($ x days)		
LOR only ☑ LOU only ☐	LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S$ 36.49		
Medical:	S$ —		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ —	(e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ —		3) Survey fee: $320.00
Total:	**S$** 12,036.49	**Global Sum S$:** —	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 12,036.49	Name 1: TEAMWORK GARAGE PTE LTD	
Payee 2: (Strike if N.A.)	S$ —	Name 2: —	
Payee 3: (Strike if N.A.)	S$ —	Name 3: —	