15/5/2010

INS. CASE OWNER: Bennie | CC 4/AIG190 10287 / K663. P. | LKK: IDAC:

ASSIGNMENT

Surveyor: kgc | DOI: 11/6/19 | Date / Time : 10/6/19
Registered in Merimen: 11/6/19.

Pre-assign / CCU / FTE

Insured Vehicle No. :	SLB 3941 L.	Claim No. :	
Name of Insured :	Yong Meng.	Policy No. :	7004459648.
Insured Tel No. :	HP:	Make / Model :	MERCEDES.
Excess Sec II :S$	D.O.A : 6/6/19.	Place of Accident :	REDHILL CLOSE
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**

SJR 195H → → →

INSRS: WSP: Guan Tel : Liability : motor. RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SJR 195H - x SLB 3941L - x
13/12/19	spoken to OI. confirmed n/a. Don't have any accident video/scene photos. said can't talk as (s)he is overseas.

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	> 22/10/19
After call ltr to OI:	

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: 4cum	S$ 2450.00 (3 days)	Reduction: 48 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 5/12/22	Confirm with: Ah Heng	Email ☒ Call ☐
Final Liability:	% 50.	(Agreed / (Assessed)) BOLA S/N No. : NIL.	If NO or B 28, Ass. Lia :
Repair Cost: 2450.00	S$ 1225.00		(CONFLICTING VERSIONS)
Loss of Rental (LOR):	S$ —	(days)	BOTH ALLEGE THE OTHER
Loss of Use (LOU): 400.00	S$ 200.00	(S$ 100 x 4 days)	ENCROACHED
Loss of Income (LOI):	S$ —	(S$ x days)	
LOR only ☐ LOU only ☐	LOR + LOU ☐	LOR + LO ☐ **[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: 2p
Legal Cost	S$ —		3) Survey fee: $320.00
Total:	S$ 1432.45	**Global Sum S$:** 1450.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒ Call ☐
Payee 1:	S$ 1450.00	Name 1: Guan Motor Works	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	