

15/5/2010

INS. CASE OWNER:

CC 4/III1901 0388, A

LKK:
IDAC:

Surveyor:

Adrian

DOI:

ASSIGNMENT

12/6/19

Date / Time :

12/6/19

Registered in Merimen:

12/6/19

Pre-assign / CCU / FTE



Insured Vehicle No. : SKA 1711A

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : \$S

D.O.A :

11/6/19

Place of Accident : _____

Is driver the owner? (YES / NO)

Nature of Accident : _____

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

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

Insured Liability : % Final ? Yes / No

SVZ 8567A

INSRS:
WSP:
Tel :
Liability :
RMKS:

MK

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

Date/ Time		STAGE	DATE / PIC
	SVZ 8567A - X	Non-Reporting ltr (1st):	
	SKA 1711A - X	Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	
		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:		Confirm by:	
Repair Cost:	L/sum \$S 1,750.00	(3 days) Reduction:	54 %	Email ☐	Call ☐
FINAL SETTLEMENT Date/Time: 27/04/2020		Confirm with: Shimin		Email ☒	Call ☐
Final Liability:	% 100.00	(Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :	
Repair Cost:	w/GST \$S 1,872.50				
Loss of Rental (LOR):	\$S (days)				
Loss of Use (LOU):	\$S 300.00 (\$ 100 x 3 days)				
Loss of Income (LOI):	\$S (\$ x days)				
LOR only ☐	LOU only ☒	LOR + LOU ☐	LOR + LO ☐	[Tick only one]	
GIA/LTA Search	\$S 7.45				
Medical:	\$S				
Disbursement:	\$S	(e.g. Tow/ Independent)		1) Claim status: Normal/Reject/Printed/Scrub	
Legal Cost	\$S			2) Report Format: TP	
				3) Survey fee: \$350.00	
Total:	\$S 2,179.95	Global Sum \$S:			
FINAL PAYMENT Date/Time:		Confirm with:		Email ☒	Call ☐
Payee 1:	\$S 2,179.95	Name 1:	Joo Hak Kee Auto Pte Ltd		
Payee 2: (Strike if N.A.)	\$S	Name 2:			
Payee 3: (Strike if N.A.)	\$S	Name 3:			