15/5/2010

INS. CASE OWNER: CC 3 /CTI1901 0501 /Jeh s3

LKK:
IDAC:

ASSIGNMENT

Surveyor: HJ

DOI: 12/6/19

Date / Time : 12/6/19.

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. :	GBB 2087.	Claim No. :	
Name of Insured :		Policy No. :	
Insured Tel No. :	HP:	Make / Model :	
Excess Sec II :S$	D.O.A : 5/6/19.	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**

SMB 1523L →

INSRS: WSP: SMRT. Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time		
	SMB 1523L + ... 12/6/19	
	GBB 2087 - X	

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:	

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: OHJ
Repair Cost: P/P	S$ 435.00	(1 days) Reduction: 45 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 05.10.20	Confirm with JIMMY	Email ☐ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 435.00		OID REAR ENDED TP
Loss of Rental (LOR):	S$ -	(days)	
Loss of Use (LOU):	S$ 250.00	(S$ 250 x 1 days)	
Loss of Income (LOI):	S$ -	(S$ x days)	
LOR only ☐ LOU only ☑	LOR + LOU ☐	LOR + LOI ☐ [Tick only one]	
GIA/LTA Search	S$ 7.00		
Medical:	S$ -		1) Claim status: Normal/~~Reject/Private Settle~~
Disbursement:	S$ -	(e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$ -		3) Survey fee: $400
Total:	S$ 692.00	**Global Sum S$:**	
FINAL PAYMENT	Date/Time: 05.10.20	Confirm with: JIMMY	Email ☐ Call ☐
Payee 1:	S$ 692.00	Name 1: SMRT BUSES LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	