

INS. CASE OWNER:

CC 6 / EGI1901 1401, Uhh

LKK:

IDAC:

Surveyor:

Mhrrun

DOI:

ASSIGNMENT

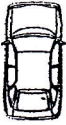
27/6/19

Date / Time :

27/6/19

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

YN 11254-

Name of Insured :

HIPP TAT HINJING BIL

Insured Tel No. :

HP:

Claim No. :

Policy No. :

Make / Model :

Place of Accident :

Excess Sec II : \$\$

D.O.A. :

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. :

Hua Pama Tok

(V/L: YES / NO)

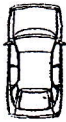
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability :

%

Final ? Yes / No

56 1329 R



INSRS:

WSP:

Tel :

Liability :

RMKS:

Fastech



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time		STAGE	DATE / PIC
	56 1329 R	Non-Reporting ltr (1st):	
	YN 11254	Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
21/7/19	Called OZ to inform TP claim	Call OI:	Yoztofia-sunny
	ORIGINAL TP LOB IN.	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:	☒
23/08/19	SEND ACCEPTANCE EMAIL TO TP.	Final Repair Bill:	☒
	NO BV REQUIRED	Car Rental Invoice:	☒
	ALL TOOLS IN ORDER.	Towing Invoice	☐
	TO CLOSE.	LTA / GIA :	☒
		Medical Bill:	☐
		PIR:	☐
		Mandate/Reject Instruction:	☐
		LOD	☒
		Payment Breakdown Form:	☐
		Post-Repair Photos:	☐
		Others:	☐

PRELIMINARY ADVICE	Date/Time: 23/08/19	Sent By: VIC	
FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: P/P	SS 4,264.16	(4 days) Reduction: 59 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 23/08/19	Confirm with:	Email ☒ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. :	23
Repair Cost: (W/65)	SS 4,562.65		
Loss of Rental (LOR):	SS 200.00	(2 days) x 4100.00	
Loss of Use (LOU):	SS -	(\$ x days)	
Loss of Income (LOI):	SS -	(\$ x days)	
LOR only ☒ LOU only ☐	LOR + LOU ☐ LOR + LO ☐	[Tick only one]	
GIA/LTA Search	SS 7.45		
Medical:	SS -		
Disbursement:	SS -	(e.g. Tow/ Independent)	
Legal Cost	SS -		
Total:	SS 4,770.10	Global Sum S\$: -	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	SS 4,770.10	Name 1: FASTECH AUTO PTE LTD	
Payee 2: (Strike if N.A.)	SS -	Name 2: -	
Payee 3: (Strike if N.A.)	SS -	Name 3: -	