15/5/2010	1 11	Mr 12-28	III.) LKK:	(5011-161	
INS. CASE OWNER	cc 4/	MG 190 13278,	MPa 5 IDAC:	(301-16)	
, 1		ASSIGNMENT		101-10	
Supreyor:	MARUS DOI:	39 3/2019	Date / Time :	117/2019	
			Registered in Merimen:	29/3/2019	
Pre-assign / CCU				1	
Insured Vehicle No	SLE 854 J	Claim No.			
***		. /		1/0	
Name of Insured	: Sudha Mary George	Policy No.			
Insured Tel No.	:HP:	Make / Mode	1:		
Excess Sec II :SS	D.O.A : (5)	Place of Acci	dent:	<u> </u>	
Is driver the owner	? (YES / NO) Nature of Accid	ent:			
If NO, Driver Name / Age: OI GIA REPO			ORT: (ES)/ NO ; TP GIA RI	EPORT: YES / NO	
Driver Tel No.: (V/L: YE3 / NO) Insured Liabil		ity: % Final? Yes/No			
FX 386P					
1 1/ 3001					
INSRS: WA	INSRS:	INSRS:	n n	NSRS:	
WSP: VIA V	WSP:	WSP: Tel:	A /A	WSP: Fel:	
Liability:	Liability:	Liability:	пп	Liability:	
RMKS:	RMKS:	RMKS:		RMKS:	
Date/ Time					
	FX386P-X; SLE88	VJ/X	STAGE	DATE / PIC	
110110	1/8/19 OINE Sent but First letter.		Non-Reporting ltr (1st): 9 8 9 Non-Reporting ltr (2nd):		
4114			Non-Reporting ltr (Final):		
			Notification ltr (if non-pickup): Call OI: 79 19 Charchy		
	11			After call ltr to OI: /e-mail 0114	
			Documentation Check List		
14/8/2020	AIG - Jeremy instructed us to set	tle lower on global sum.	Notification ltr (if non-picku	p)	
khanchna Informed AIG that we settled for global \$4,700(all in).			After call ltr to OI:		
	Email sent to MK to close.		Authorisation To Act: Release Voucher:		
			Final Repair Bill:		
			Car Rental Invoice:		
			Towing Invoice		
	-,3-		LTA / GIA :		
		3.0	Medical Bill:		
(4))			PIR: Mandate/Reject Instructio	n:	
			LOD		
			Payment Breakdown Form	n:	
PRELIMINARY ADVICE Date/Time: Sent By:			Post-Repair Photos:		
4			Others:		
FINALIZATION	2 400 2 2000	firm with:	Confirm by:		
Repair Cost: L/S FINAL SETTLEMENT		action: 3,160/41%	Email Call	Call	
Final Liability:	Date/Time: 12/8/2020 Confirm with ((Agreed / Assessed) BOL		If NO or B 28, Ass. Lia:		
Repair Cost: (w/ GST)	s\$ 4,815.00		1010 REVERS	e occide	
Loss of Rental (LOR):	S\$ (days)		INTO PARKI	201P VEH)	
Loss of Use (LOU):	\$\$ 90.00 (\$ 30 x 3 days)				
Loss of Income (LOI): LOR only LOU only	S\$ (\$ x days) LOR + LOU LOR + LOI	[Tick only one]			
GIA/LTA Search	\$\$	_ [viewomi] one]			
Medical:	S\$		1) Claim status: Normal/F	Reject/Private Settle	
Disbursement:	S\$ (e.g. Tow/ Independent)		2) Report Format: TP 3) Survey fee: \$320 +		
Legal Cost	S\$ 4.905.00 Global Sum S\$: 4,700.00			· 54	
Total: FINAL PAYMENT	S\$ 4,905.00 Global Sum St Date/Time: Confirm with:	→ , / UU.UU	Email Call		
	Date: Line:	TA Performance Pte Ltd		2	
Payee 1: Payee 2: (Strike if N.A.)	S\$ 4,700.00 Name 1:				
Payee 3: (Strike if N.A.)	S Name 3				