15/5/2010

INS. CASE OWNER: | CC 4 /FWD1901 4441, U wb69 P | LKK: IDAC:

ASSIGNMENT

Surveyor: marcus. DOI: 19/8/19. (Mon) Date / Time: 19/8/19.

Registered in Merimen: 19/8/19.

Pre-assign / CCU / FTE

Insured Vehicle No. : SKD 8828A		Claim No. :	
Name of Insured : ADRIAN TING HAW KIN.		Policy No. : PVPV2019-00011498.	
Insured Tel No. :	HP:	Make / Model : BMW	
Excess Sec II :S$	D.O.A : 18/8/19. (TUE)	Place of Accident : 519 TAMPINES CENTRAL 8	
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

SJT 3879T → ______ → ______ → ______

INSRS:	INSRS:	INSRS:	INSRS:
WSP: Focus.	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability : Auto.	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time	
	SJT3879T - X SKD8828A - X
18/11/19 -	File -) typemandate
3/12/19 -	File -) Suci to send DV & request ATA.

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: 18/11/19 Sent By: Ch

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: L/sum	S$ 5,200.00 (5 days)	Reduction: - 40 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 28/12/19	Confirm with Jenny	Email ✓ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No.: N/C	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 5564.00		
Loss of Rental (LOR):	S$ 700.00	(7 days) $100	
Loss of Use (LOU):	S$ —	(S x days)	
Loss of Income (LOI):	S$ —	(S x days)	
LOR only ✓ LOU only ☐	LOR + LOU ☐	LOR + LOI ☐ [Tick only one]	
GIA/LTA Search	S$ 2.00		
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: $500.00
Total:	S$ 6266.00	Global Sum S$: 6200.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ✓ Call ☐
Payee 1:	S$ 6200.00	Name 1: Focus Auto Pte Ltd	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	