

15/5/2010

INS. CASE OWNER:

CC 6 / CT1901

8182, Ad

s3

LKK:

IDAC:

Surveyor:

Adrian

DOI:

ASSIGNMENT

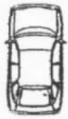
11/10/19

Date / Time:

11/10/19

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SLR 9478J

Claim No.:

Name of Insured:

Policy No.:

Insured Tel No.:

HP:

Make / Model:

Excess Sec II :S\$

D.O.A:

9/10/19

Place of Accident:

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

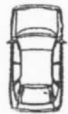
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SLJ 1879E



INSRS:

WSP:

Tel:

Liability:

RMKS:

Hua Meng



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time		STAGE	DATE / PIC
	SLJ 1879E - x	Non-Reporting ltr (1st):	
	SLR 9478J - 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:	
FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost:	S\$ 5,000.00	(5 days) Reduction: 56 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 21/04/2020	Confirm with: Jing Yee	Email ☒ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No.: NIL	If NO or B 28, Ass. Lia:
Repair Cost:	S\$ 5,000.00	OID HIT PARKED TP	
Loss of Rental (LOR):	S\$ 500.00	(5 days) X \$100	
Loss of Use (LOU):	S\$ -	(\$ x 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\$ -		1) Claim status: Normal/Dispute/Dispute Settled
Disbursement:	S\$ -	(e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S\$ -		3) Survey fee: \$400
Total:	S\$ 5,507.45	Global Sum S\$:	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S\$ 5,507.45	Name 1: Hua Meng Spray Painting Workshop	
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	