s3

15/5/2010

INS. CASE OWNER: | CC 6 /AIG1901 9293 / Aelli | LKK: IDAC:

ASSIGNMENT

Surveyor: Adrian

DOI: 20|10|19

Date / Time : 30|10|19

Registered in Merimen: 31|10|19.

Pre-assign / CCU / FTE

Insured Vehicle No. :	SKU 1727P	Claim No. :	
Name of Insured :		Policy No. :	
Insured Tel No. :	HP:	Make / Model :	
Excess Sec II :S$	D.O.A : 20|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**

SLP 1703Y. → → →

INSRS: WSP: Xin Hua. Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time			
	SLP 1703Y – NBA | MS919004 20|10|19 DVU: 24|9|19	**STAGE**	**DATE / PIC**
	SKU 1727P – X	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:	
PRELIMINARY ADVICE	Date/Time: Sent By:	Post-Repair Photos:	
		Others:	

FINALIZATION	Date/Time:	Confirm with:	Confirm by: LWP
Repair Cost: P/P	S$ 5,415.90 (4 days)	Reduction: 60 %	Email Call
FINAL SETTLEMENT	Date/Time: 21.10.20	Confirm with KELVIN	Email Call
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27 OI REAR ENDED TP	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 5,415.90		
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 + LOI **[Tick only one]**	
GIA/LTA Search	S$ 7.45		
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: $320
Total:	**S$** 5,923.35	**Global Sum S$:**	
FINAL PAYMENT	Date/Time: 21.10.20	Confirm with: KELVIN	Email Call
Payee 1:	S$ 5,923.35	Name 1: XIN HUA WORKSHOP PTE LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	