

15/5/2010

INS. CASE OWNER:

CC 4/AIG1902 1214, T2dwh

LKK:

IDAC:

Surveyor:

Taufik.

DOI:

ASSIGNMENT

T2dwh

Date / Time:

12/1/19

Registered in Merimen:

T2dwh

Pre-assign / CCU / FTE



Insured Vehicle No. : SLM 1378T

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : \$ _____ D.O.A : 29/1/19

Place of Accident : _____

Is driver the owner? (YES / NO) Nature of Accident : _____

If NO, Driver Name / Age : _____

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

Driver Tel No. : _____

(V/L: YES / NO)

Insured Liability : % Final ? Yes / No

XD 27766

YP 67452

SLM 1378T

ST 76679

INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS: 01INSRS:
WSP: teamwork
Tel :
Liability :
RMKS: TP

Date/ Time	STAGE	DATE / PIC
ST 76679 SLM 1378T	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: _____ Sent By: _____		
FINALIZATION Date/Time: _____ Confirm with: _____ Confirm by: _____		
Repair Cost:	S\$ 3,750.00 (5 days) Reduction: 69 %	Email ☐ Call ☐
FINAL SETTLEMENT Date/Time: 23/04/2020 Confirm with: Shu Shan Email ☒ Call ☐		
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0%
Repair Cost: (w/GST)	S\$ 4,012.50	4 Veh C.C, OI was 2nd
Loss of Rental (LOR):	S\$ 600.00 (6 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\$ 36.49	
Medical:	S\$ -	1) Claim status: Normal/Project/Private/Settle
Disbursement:	S\$ - (e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S\$ -	3) Survey fee: \$320
Total:	S\$ 4,648.99 Global Sum S\$:	
FINAL PAYMENT Date/Time: _____ Confirm with: _____ Email ☐ Call ☐		
Payee 1:	S\$ 4,648.99 Name 1: Teamwork Garage Pte Ltd	
Payee 2: (Strike if N.A.)	S\$ Name 2:	
Payee 3: (Strike if N.A.)	S\$ Name 3:	