15/5/2010

INS. CASE OWNER: CC 4 /FCI190 21773 /Ada3

LKK:

IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 10/12/19 Date / Time : 09/12/19

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : SHC 1909L

Name of Insured :

Insured Tel No. : HP:

Excess Sec II :S$ D.O.A : 01/12/2019

Is driver the owner? (YES / NO)

If **NO**, Driver Name / Age :

Driver Tel No. : (V/L: YES / NO)

Claim No. :

Policy No. :

Make / Model :

Place of Accident :

Nature of Accident :

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

Insured Liability : % **Final ? Yes / No**

PA 8798 J → → →

INSRS:
WSP: MG SOLUTION
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	PA8798J - NBA/LIP1301607941 DOA 31/08/2013
	-NBA/LIP1302040154 DOA 30/10/2013
	-NBA/LIP1302143754 DOA 14/11/2013
	SHC1909L - CS/FCI1401377/5Km3E3 DOA 16/07/2014
	-CS/FCI1700240A/Ugh3n2 DOA 03/02/2017
	-CS3/FCI1202167Z/Gr21 DOA 04/11/2012

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:	Sent By:	
FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost:	S$ 2,000.00 (5 days)	Reduction: 76 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 02/07/2020	Confirm with Ms Wong	Email ✓ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 9(c)	If NO or B 28, Ass. Lia :
Repair Cost: (w/GST)	S$ 2,140.00		
Loss of Rental (LOR):	S$ - (days)		
Loss of Use (LOU):	S$ 1,050.00 ($ 7 x 150 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 [redacted]
Disbursement:	S$ -	(e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$ -		3) Survey fee: $350
Total:	S$ 3,197.45	**Global Sum S$:**	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 3,197.45	Name 1: MG Solution Pte Ltd	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	