15/5/2010

INS. CASE OWNER: | CC 4 /FWD190 22/4/20 / A plb | LKK: | IDAC:

ASSIGNMENT

Surveyor: Adrian | DOI: 20/11/19 | Date / Time : 20/11/19 | Registered in Merimen: 22/11/19.

Pre-assign / CCU / FTE

Insured Vehicle No. : SLT 1221 A		Claim No. :	
Name of Insured :		Policy No. :	
Insured Tel No. :	HP:	Make / Model :	
Excess Sec II :S$	D.O.A : 20/11/19.	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**

SLL 8737Y → ______ → ______ → ______

INSRS: WSP: Advance Auto Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SLL 8737Y } 20/11/19 ... 20/11/19
	SLT 1221 A }
12/04/2020	PLS SEE VIEWS FOR DETAILS

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: L/sum	S$ 9,200.00 (10 days)	Reduction: 40 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 10/03/2020	Confirm with Xavier	Email ✓ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 9,200.00		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 780.00 ($ 60 x 13 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/~~Reject/Private Settle~~
Disbursement:	S$	(e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$		3) Survey fee: $500.00
Total:	**S$** 9,987.45	**Global Sum S$:** 9,980.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ✓ Call ☐
Payee 1:	S$ 9,980.00	Name 1: Advance Auto Garage	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	