

ASSIGNMENT

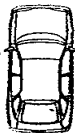
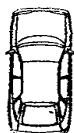
Surveyor:

KENNETHDOI: **24/12/2019**Date / Time : **24/12/2019**Registered in Merimen: **26/12/2019****Pre-assign / CCU / FTE**Insured Vehicle No. : **SLN 6885H**Claim No. : **0410989699SG**Name of Insured : **HAPPE INTERIOR & DESIGN**Policy No. : **1800053167**Insured Tel No. : _____ HP: _____
Excess Sec II :S\$ _____ D.O.A : **21/12/2019 18:55**Make / Model : **AUDI Q2/ Q2 SPORT 1.0 TFSI S TRONIC**Place of Accident : **FILTER LANE FROM PIE TOWARD CTE (CITY)**

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

If NO, Driver Name / Age : **ONG CHOO YIH**

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

Driver Tel No. : **+65-82223466** (V/L: YES / NO)Insured Liability : % **Final ? Yes / No****SLK 1780A**INSRS:
WSP: **ESTEEM PML**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SLK 1780A - CC4/ASM19005157/Kga3; DOA: 20.3.19	Non-Reporting ltr (1st):	
	- CS/INC19013052/Ktf3n2; DOA: 12.7.19	Non-Reporting ltr (2nd):	
	SLN 6885H - CC3/AIG18021880/Asbe2; DOA: 22.10.18	Non-Reporting ltr (Final):	
***	AIG delay assignment.	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:	
Repair Cost:	S\$ 1,097.16 (2 days) Reduction: 56 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 27/04/2020 Confirm with Carmen	Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost: (w/GST)	S\$ 1,173.96		
Loss of Rental (LOR):	S\$ 315.80 (4 days) X \$78.95		
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\$ 1,497.21	Global Sum S\$:	
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☐ Call ☐	
Payee 1:	S\$ 1,497.21	Name 1: Esteem Performance Pte Ltd	
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	