JHS CASE OWNER: CC6/CTI20000608/Aba3 9/2

ASSIGNMENT

Surveyor: ADRIAN DOI: 08/01/2020 Date / Time: 08/01/2020

Pre-assign / CCU / FTE

Insured Vehicle No. : SBH 8388M Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Rec'd /N$ DOA : 07/01/2020 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. : (VIL: YES / NO) Insured Liability : % Final ? Yes / No

SLX 6520H

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

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/Time	
	SBH 8388M / SLX 6520H NA/TMI20000468/r3; DOA: 07.01.2020 - CC4/ASM19009045/Aga3q2; DOA: 18.05.19 - NA/TMI19003947/r3; DOA: 01.03.19
03/07/2020 @ 4.57 pm	- spoke to OI, OI rear-ended TP, informed TP claims, angle & title & owners NCD will be affected,
	- FINALIZED
12/02/2020	- TYPE REPORT WHILE PENDING FOR TP LOD - REPORT DONE - TP LOD IN BY EMAIL
26/03/2020	- CHECK MANDATE APPROVAL TO OI BY EMAIL
28/08/2020	settled & closed / file in drawer

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	7 03/07/20 JC
After call ltr to OI:	

Documentation Check List:	Handler	Typist
Notification ltr (if non-pickup)		
After call ltr to OI:	✓	
Authorization To Act:	✓	
Release Voucher:	✓	
Final Repair Bill:	✓	
Car Rental Invoice:		
Towing Invoice		
LTA / GIA :	✓	
Medical Bill:		
PIP:		
Mandate/Reject Instruction:	✓	
LOD	✓	
Payment Breakdown Form:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE Date/Time: 12/02/2020 Sent By: QS

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: L/S	S$ 8,700.00 (9 days) Reduction: 42 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 28/08/2020 Confirm with MS WONG		Email ✓ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :
Repair Cost: (w/gst)	S$ 9,309.00		(OLD REAR-ENDED TP)
Loss of Rental (LOR):	S$ — (days)		
Loss of Use (LOU):	S$ 800.00 ($ 80 x 10 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: $400.00
Total:	S$ 10,116.45	Global Sum S$: 10,100.00	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 10,100.00	Name 1:	MG SOLUTION PTE LTD
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—