INS. CASE OWNER:	**CC6/FCI20001133/Aea3**

LKK:
IDAC:

ASSIGNMENT

Surveyor: **ADRIAN** DOI: 17/01/2020 Date / Time : 17/01/2020

Registered in Merimen: _____

Pre-assign / CCU / FTE

Insured Vehicle No. : **SHB 4228D** Claim No. : _____

Name of Insured : _____ Policy No. : _____

Insured Tel No. : _____ HP: _____ Make / Model : _____

Excess Sec II :S$ _____ D.O.A : **15/01/2020 02:15** 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**

SJW 3563H → → _____ → _____

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

Date/ Time	SJW 3563H - CC6/AIG13008981/Ak1a3y; DOA: 11.05.13 SHB 4228D - CS/FCI17013458/Kqh3n2; DOA: 07.07.17 - NS/INC13002542/H1qn; DOA: 04.02.13	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:	

PRELIMINARY ADVICE	Date/Time:	Sent By:	Post-Repair Photos:	
			Others:	

FINALIZATION	Date/Time:	Confirm with:	Confirm by: **LWP**

Repair Cost:	**L/S** S$ 7,400.00	(7 days) Reduction: 58 %	Email ☐ Call ☐

FINAL SETTLEMENT	Date/Time: 03.07.20	Confirm with **SU WONG**	Email ☐ Call ☐

Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 8a	If NO or B 28, Ass. Lia :
Repair Cost: **w/GST**	S$ 7,918.00	OID TRAVEL STRAIGHT ALONG MINOR ROAD WITH STOP LINE	
Loss of Rental (LOR):	S$ -	(days)	
Loss of Use (LOU):	S$ 720.00	($ 80 x 9 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$ 50.00	(e.g. Tow/~~Independent~~)	2) Report Format: **TP**
Legal Cost	S$ -		3) Survey fee: $ 600
Total:	S$ 8,695.45	**Global Sum S$:** 8,690.00	

FINAL PAYMENT	Date/Time: 03.07.20	Confirm with: **SU WONG**	Email ☐ Call ☐

Payee 1:	S$ 8,690.00	Name 1:	**MG SOLUTION PTE LTD**
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	