

INS. CASE OWNER:

SAHHA

CC3 /AIG14010364 / K 63

LKK:
IDAC:

ASSIGNMENT

Surveyor:

Kenneth

DOI: 02/06/14

Date / Time:

02/06/14

Registered in Merimen:

03/06/14

Pre-assign / CCU / FTE

Insured Vehicle No.:

FBD 9311 Z

Name of Insured:

James Y20 Chun Yong

Insured Tel No.:

HP: 9646 7886

Excess Sec II :SS

D.O.A: 25/05/14

Is driver the owner? (YES / NO)

Nature of Accident:

Claim No.:

800744789

Policy No.:

2100323195

Make / Model:

Place of Accident:

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

If NO, Driver Name / Age:

(V/L: YES / NO Insured Liability:

% Final ? Yes / No

Driver Tel No.:

SHD 235 Z



INSRS:

WSP: Trans-cab

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time	STAGE	DATE / PIC
18/06/14 -	FOR CSO ONLY:	
	Is driver the owner? (YES / NO)	
	If NO, Driver Name / Age:	
	Driver's Own Vehicle Number:	
	Insurance Company:	
	SHD 235 Z - X	
	FBD 9311 Z - X	
18/06/14 -	01 has yet reported. First letter send out.	
23/06/14 @ 2PM	STOKED TO OI. HE SAID HE RECEIVED LETTER.	
	HE COMPLAINED HE WAS NOT THE RIDER AT	
	THE TIME. HE WILL CHECK WHAT OI TO DO	
	THE REPORT ASAP.	
02/09/14	NO OI GIA REPORT IN YET.	
17/09/14	NO OI GIA REPORT IN YET.	
	SAND 1ST AR TO OI / TRAFFIC POLICE.	
	OI NON REPORTING.	
01/10/14	OI CAME TO OFFICE TO LODGE GIL	
	REPORT.	
27/10/14	Only Police Report In View. S. Merimen NO GIP	
	POTENTIAL REPURATE CLAIM.	
	PENDING AIG EMAIL.	
12/11/15	ROSEND EMAIL TO AIG.	
18/08/15	EMAIL AIG TO CLOSE CASE & SUBMIT WP REPORT.	
	AIG APPROVED TO CLOSE CASE & SUBMIT WP REPORT.	
	NO SETTLEMENT. TO CLOSE.	
	TP NO EVIDENCE	
06/11/15	TO CANCEL FILE. Duplication.	
18/9/14	1ST AR Registered mail to OI. Charge charges and \$500, file return back to him	
	(NO SETTLEMENT)	
FINAL SETTLEMENT	Date: -	Confirm with
Repair Cost:	SS -	Final Liability:
Loss of Rental:	SS -	(days)
Loss of Use:	SS -	(S x days)
Disbursement:	SS -	
Legal Cost:	SS -	
Total:	SS -	Global Sum: SS
	% (Agreed / Assessed)	BOLA S/N No.:
	1) Claim status: Normal/Reject/Private Settle	If NO or B 28, Ass. Lia:
	2) Report Format:	
	3) Survey fee:	