

INS. CASE OWNER:

ASSIGNMENTSurveyor: **ADRIAN**DOI: **17/02/2020**Date / Time: **17/02/2020**Registered in Merimen: **---**

Pre-assign / CCU / FTE

Insured Vehicle No. : **SMP 1812D**Claim No. : **---**Name of Insured : **---**Policy No. : **---**Insured Tel No. : **---** HP: **---**Make / Model : **---**Excess Sec II :S\$ **---** D.O.A : **13/02/2020 22:30**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**

GBE 152U

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

Date/ Time	GBE 152U -X	SMP 1812D - X	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: ADRIAN	
Repair Cost: L/S	S\$ 5700.00 (6 days) Reduction	13,916.84 % 71	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 28/04/2020	Confirm with SU	Email ☒	Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 23	If NO or B 28, Ass. Lia :		
Repair Cost: (W/GST)	S\$ 6099.00			
Loss of Rental (LOR):	S\$ (days)			
Loss of Use (LOU):	S\$ 540.00 (\$ 60 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\$ (e.g. Tow/ Independent)	2) Report Format: TP		
Legal Cost	S\$	3) Survey fee: \$400.00		
Total:	S\$ 6646.45	Global Sum S\$: 6600.00		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒	Call ☐
Payee 1:	S\$ 6600.00	Name 1:	MG SOLUTION PTE LTD	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		