15.5.2010

INS. CASE OWNER: CHAN KIAN MENG | CC6 / AIG 2000 3545 / U b63 | LKK: IDAC:

ASSIGNMENT

Surveyor: Marcus DOI: 1/4/2020 Date / Time: 3/3/2020

Registered in Merimen: 4/3/2020

Pre-assign / CCU / FTE

Insured Vehicle No. : SMF 7097P Claim No. : 7537737171SG

Name of Insured : TAN SAI Policy No. : 1800138969

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 1/3/2020 Place of Accident : BLK 12 EUNOS CRESCENT CAR PARK

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

SMA 9311J → → →

INSRS:	INSRS:	INSRS:	INSRS:
WSP: Jin Auto	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time	
	SMA 9311J : X ; SMF 7097P : X
08/04/2020	- FILE REVIEWED. OI PAX OPEN DOOR.
	- EMAIL LIABILITY CLEAR
6/4	email to OI
18/6	pending final estimate.
12/6.	pending LOD. / type report
10/09/2020	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:	
After call ltr to OI:	→ email only 6/4

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: Email ☐ Call ☐

Repair Cost: V/P S$ 380.00 (2 days) Reduction: 60 %

FINAL SETTLEMENT Date/Time: 10/09/2020 Confirm with JOVIS Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 26a	If NO or B 28, Ass. Lia :	COI PAX OPEN DOOR
Repair Cost: (W/gst)	S$ 406.60		
Loss of Rental (LOR):	S$ - (days)		
Loss of Use (LOU):	S$ 180.00 (S$ 60 x 3 days)		
Loss of Income (LOI):	S$ - (S$ x days)		
LOR only ☐ LOU only ☑	LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S$ -	1) Claim status: Normal/Reject/Private Settle	
Medical:	S$ -	2) Report Format:	TP
Disbursement:	S$ - (e.g. Tow/ Independent)	3) Survey fee:	$320.00
Legal Cost	S$ -		
Total:	S$ 586.60 Global Sum S$: -		

FINAL PAYMENT Date/Time: Confirm with: Email ☐ Call ☐

Payee 1:	S$ 586.60	Name 1:	JIN AUTO SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$ -	Name 2:	-
Payee 3: (Strike if N.A.)	S$	Name 3:	