

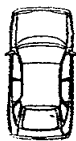
INS. CASE OWNER:

CC3/AIG20004157/Aea3

IDAC:

ASSIGNMENT

Surveyor: _____ DOI: _____ Date / Time : _____
 Registered in Merimen: _____

Pre-assign / CCU / FTE

Insured Vehicle No. : **SKM 2696E**
 Name of Insured : _____
 Insured Tel No. : _____ HP: _____
Excess Sec II :S\$ _____ D.O.A : **16/03/2020**

Claim No. : _____
 Policy No. : _____
 Make / Model : _____
 Place of Accident : _____

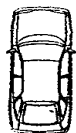
Is driver the owner? (YES / NO) Nature of Accident : _____

If NO, Driver Name / Age :

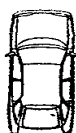
Driver Tel No. :

(V/L: YES / NO)

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

Insured Liability : % **Final ? Yes / No****SGY 7740L**

INSRS:
WSP: PREMIUM
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		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: P/P	S\$ 5,454.32	(3 days) Reduction: 76 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 21.10.20	Confirm with NADIA	Email ☐ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S\$ 5,836.12	OID REVERSED HIT TP VEHICLE	
Loss of Rental (LOR):	S\$ -	(days)	
Loss of Use (LOU):	S\$ 300.00	(\$ 100 x 3 days)	
Loss of Income (LOI):	S\$ -	(\$ x days)	
LOR only ☐ LOU only ☒	LOR + LOU ☐ LOR + LOI ☐	[Tick only one]	
GIA/LTA Search	S\$ 2.00		
Medical:	S\$ -	1) Claim status: Normal/ Reject/Partial Settlement	
Disbursement:	S\$ -	(e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S\$ -	3) Survey fee: \$320	
Total:	S\$ 6,138.12	Global Sum S\$:	
FINAL PAYMENT	Date/Time: 21.10.20	Confirm with: NADIA	Email ☐ Call ☐
Payee 1:	S\$ 6,138.12	Name 1:	PREMIUM AUTOMOBILES PTE LTD
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	