CC3/LCR17008774/Kka3q2-1

15/5/2010

INS. CASE OWNER: CC /AIG1906

LKK:

IDAC:

ASSIGNMENT

Surveyor: _____ DOI: _____ Date / Time : _____

Registered in Merimen: _____

Pre-assign / CCU / FTE

Insured Vehicle No. : _____ Claim No. : _____

Name of Insured : _____ Policy No. : _____

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

Excess Sec II :S$ _____ D.O.A : _____ 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**

INSRS:	INSRS:	INSRS:	INSRS:
WSP:	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	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:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE	Date/Time:		Sent By:	
FINALIZATION	Date/Time:		Confirm with:	Confirm by:
Repair Cost: P/P	S$ 2,632.98	(2 days)	Reduction: 23,458.78/90 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time:		Confirm with	Email ☑ Call ☐
Final Liability: 100	% 50	(Agreed / Assessed)	BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: 2,817.29 (w/GST)	S$ 1,408.64			CONFLICTING VERSIONS
Loss of Rental (LOR) 211.48	S$ 105.74	(2 days)	x $105.74	
Loss of Use (LOU):	S$	($ x days)		
Loss of Income (LOI): $100	S$ 50	($ 50 x 2 days)		
LOR only ☐ LOU only ☐	LOR + LOU ☐	LOR + LOI ☑	[Tick only one]	
GIA/LTA Search 6.00	S$ 6.00			
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: WP SUBMITTED EARLIER
Total: 3,134.77	S$ 1,570.38	**Global Sum S$:**	$1,560	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ $1,560	Name 1:	Trans-Cab Auto Services Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	