

15/5/2010

INS. CASE OWNER:

CC /AIG1900 /

LKK:

IDAC:

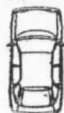
ASSIGNMENT

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 : \$ \$ 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:
WSP:
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:	☐ ☐
	Post-Repair Photos:	☐ ☐
	Others:	☐ ☐

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost: P/P \$ \$ 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 :

(w/GST) 2,817.29 \$ \$ 1,408.64

CONFLICTING VERSIONS

Loss of Rental (LOR) 211.48 \$ \$ 105.74 (2 days) x \$105.74

Loss of Use (LOU): \$ \$ (\$ x days)

Loss of Income (LOI): \$100 \$ \$ 50 (\$ 50 x 2 days)

LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOU ☒ [Tick only one]

GIA/LTA Search 6.00 \$ \$ 6.00

Medical: \$ \$

Disbursement: \$ \$ (e.g. Tow/ Independent)

Legal Cost \$ \$

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

Total: 3,134.77 \$ \$ 1,570.38 **Global Sum \$ \$: \$1,560****FINAL PAYMENT**

Date/Time:

Confirm with:

Email ☐ Call ☐

Payee 1: \$ \$

Name 1:

Payee 2: (Strike if N.A.) \$ \$

Name 2:

Payee 3: (Strike if N.A.) \$ \$

Name 3: