

INS. CASE OWNER:

CC6 /AIG 2000 7544 / Aes3

LKK:

IDAC:

## ASSIGNMENT

Surveyor:

Adrian

DOI:

21/07/2020

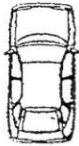
Date / Time :

21/07/2020

Registered in Merimen:

22/07/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SBY 5115P

Claim No. : \_\_\_\_\_

Name of Insured : Wan Tong Chee

Policy No. : \_\_\_\_\_

Insured Tel No. : \_\_\_\_\_ HP: \_\_\_\_\_

Make / Model : \_\_\_\_\_

Excess Sec II : S\$ \_\_\_\_\_ D.O.A : 06/04/2020

Place of Accident : \_\_\_\_\_

Is driver the owner? ( ☒ YES / NO ) Nature of Accident : \_\_\_\_\_

If NO, Driver Name / Age :

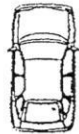
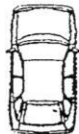
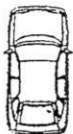
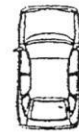
OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NO

Driver Tel No. :

(V/L ☒ YES / NO )

Insured Liability : % Final ? Yes / No

SLR 5430Y

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

Date/ Time	STAGE	DATE / PIC
	SLR 5430Y : X ; SBY 5115P : X	
24/07/2020	- OINR *** SENT OUT FIRST NON-REPORTING LETTER	
13/08/2020	✓ - OI GIA REC'D	
	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)	<input type="checkbox"/>
	After call ltr to OI:	<input type="checkbox"/>
	Authorisation To Act:	<input type="checkbox"/>
	Release Voucher:	<input type="checkbox"/>
	Final Repair Bill:	<input type="checkbox"/>
	Car Rental Invoice:	<input type="checkbox"/>
	Towing Invoice	<input type="checkbox"/>
	LTA / GIA :	<input type="checkbox"/>
	Medical Bill:	<input type="checkbox"/>
	PIR:	<input type="checkbox"/>
	Mandate/Reject Instruction:	<input type="checkbox"/>
	LOD	<input type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/>
	Post-Repair Photos:	<input type="checkbox"/>
	Others:	<input type="checkbox"/>
PRELIMINARY ADVICE Date/Time:	Sent By:	
FINALIZATION Date/Time:	Confirm with:	Confirm by: LWP
Repair Cost: L/S S\$ 2,200.00 ( 3 days) Reduction: 70 %	Email <input type="checkbox"/> Call <input type="checkbox"/>	
FINAL SETTLEMENT Date/Time: 03.12.20 Confirm with: SU WONG	Email <input type="checkbox"/> Call <input type="checkbox"/>	
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 10	If NO or B 28, Ass. Lia :	
Repair Cost: w/GST S\$ 2,354.00	OID MAKE A LEFT TURN INTO MAIN ROAD	
Loss of Rental (LOR): S\$ - ( days)		
Loss of Use (LOU): S\$ 200.00 (\$ 50 x 4 days)		
Loss of Income (LOI): S\$ - (\$ x days)		
LOR only <input type="checkbox"/> LOU only <input checked="" type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/> [Tick only one]		
GIA/LTA Search S\$ 7.45		
Medical: S\$ -	1) Claim status: Normal/Reject Private Sewle	
Disbursement: S\$ - (e.g. Tow/ Independent )	2) Report Format: TP	
Legal Cost S\$ -	3) Survey fee: \$320	
Total: S\$ 2,561.45 Global Sum S\$:		
FINAL PAYMENT Date/Time: 03.12.20 Confirm with: SU WONG	Email <input type="checkbox"/> Call <input type="checkbox"/>	
Payee 1: S\$ 2,561.45 Name 1: MG SOLUTION PTE LTD		
Payee 2: (Strike if N.A.) S\$ Name 2:		
Payee 3: (Strike if N.A.) S\$ Name 3:		