

INS. CASE OWNER:

CC 6 /AIG 2000 7690 / Uks3

LKK:

IDAC:

ASSIGNMENT

Surveyor: MarcusDOI: 27/07/2020Date / Time : 27/07/2020Registered in Merimen: 27/07/2020

Pre-assign / CCU / FTE

Insured Vehicle No. : SMM 4107C

Claim No. : _____

Name of Insured : Tew See Mong

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : \$\$ _____ D.O.A : 23/07/2020

Place of Accident : _____

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

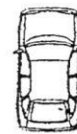
If NO, Driver Name / Age : _____

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

Driver Tel No. : _____ (V/L: YES / NO)

Insured Liability : % Final ? Yes / No

SME 7086B

INSRS:
WSP: **FASTECH**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SME 7086B : X ; SMM 4107C : X	STAGE	DATE / PIC
29/07/2020	- OINR *** SENT OUT FIRST NON-REPORTING LETTER	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 \$800.00 (3 days) Reduction: \$2,492.60 % 76	Email ☒	Call ☐
FINAL SETTLEMENT Date/Time: 29/03/2021 Confirm with JASON Email ☒ Call ☐			
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost:	\$856.00 W/GST		
Loss of Rental (LOR):	\$360.00 (3 days) x \$120.00		
Loss of Use (LOU):	\$ (x days)		
Loss of Income (LOI):	\$ (x days)		
LOR only ☒ LOU only ☐	LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	\$2.00		
Medical:	\$	1) Claim status: <u>Normal</u> /Reject/Private Settle	
Disbursement:	\$ (e.g. Tow/ Independent)	2) Report Format: <u>TP</u>	
Legal Cost	\$	3) Survey fee: \$320.00	
Total:	\$1,218.00 Global Sum \$\$:		
FINAL PAYMENT Date/Time: _____ Confirm with: _____ Email ☒ Call ☐			
Payee 1:	\$1,218.00 Name 1: FASTECH AUTO PTE LTD		
Payee 2: (Strike if N.A.)	\$ Name 2:		
Payee 3: (Strike if N.A.)	\$ Name 3:		