

INS. CASE OWNER:

CC 4 /AIG 2000 8161 / Ues3

LKK:

IDAC:

ASSIGNMENT

Surveyor:

Marcus

DOI:

07/08/2020

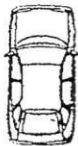
Date / Time :

06/08/2020

Registered in Merimen:

06/08/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SLS 132K

Claim No. : _____

Name of Insured : LIM PENG YONG

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : S\$ _____ D.O.A : 03/08/2020

Place of Accident : _____

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

If NO, Driver Name / Age :

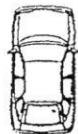
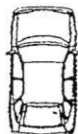
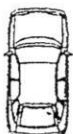
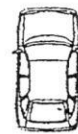
OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NO

Driver Tel No. :

(V/L: ☒ YES / NO)

Insured Liability : % Final ? Yes / No

PC 6753R

INSRS:
WSP: AIM
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time

PC 6753R : X ; SLS 132K : X

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: CKS

Repair Cost: L/S S\$ 5,500.00 (3 days) Reduction: 58 %

Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 11.09.20 Confirm with JACYNE

Email ☐ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 9a

If NO or B 28, Ass. Lia :

Repair Cost: w/GST S\$ 5,885.00

OI MAKE A RUGT TURN INTO MINOR ROAD HIT TP

Loss of Rental (LOR): S\$ - (days)

Loss of Use (LOU): S\$ 240.00 (\$ 80 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\$ -

Medical: S\$ -

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

Legal Cost S\$ -

Total: S\$ 6,125.00

Global Sum S\$:

FINAL PAYMENT Date/Time: 11.09.20

Confirm with: JACYNE

Email ☐ Call ☐

Payee 1: S\$ 6,125.00

Name 1: AUTOMOBILE INTEGRATED MANAGEMENT PTE LTD

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

Name 2:

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

Name 3: