15/5/2010

INS. CASE OWNER: CC4/AIG20009994/Ues3

LKK:

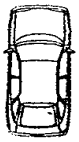
IDAC:

ASSIGNMENT

Surveyor: Marcus DOI: 18/09/2020 Date / Time : 17/09/2020

Registered in Merimen: 17/09/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SMK 2774A Claim No. :

Name of Insured : LOONG JIEH CHUAN Policy No. :

Insured Tel No. : HP: Make / Model :

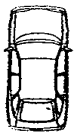
Excess Sec II :S$ D.O.A : 15/09/2020 Place of Accident :

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

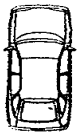
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

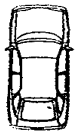
SML 6394G → → →



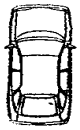
INSRS:
WSP: AIM
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SML 6394G : X ; SMK 2774A : 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:	
PRELIMINARY ADVICE	Date/Time: Sent By:	Post-Repair Photos:	
		Others:	

FINALIZATION	Date/Time:	Confirm with:	Confirm by: CKS
Repair Cost: L/S	S$ 1,200.00 (2 days)	Reduction: 70 %	Email Call
FINAL SETTLEMENT	Date/Time: 07.04.21	Confirm with JACYNE	Email Cal
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 1,284.00	OID CHANGED LANE HIT TP	
Loss of Rental (LOR):	S$ - (days)		
Loss of Use (LOU):	S$ 120.00 ($ 60 x 2 days)		
Loss of Income (LOI):	S$ - ($ x days)		
LOR only LOU only ✓	LOR + LOU LOR + LO	[**Tick only one**]	
GIA/LTA Search	S$ -		
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: $320
Total:	**S$** 1,404.00	**Global Sum S$:**	

FINAL PAYMENT	Date/Time: 07.04.21	Confirm with: JACYNE	Email Cal
Payee 1:	S$ 1,404.00	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:	