

ASSIGNMENT

CC4/AIG20014612/R1pa3

Surveyor:

Rasul

DOI:

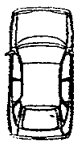
29/12/2020

Date / Time :

28/12/2020

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : GBB 1595J

Claim No. :

Name of Insured :

Policy No. :

Insured Tel No. :

HP:

Make / Model :

Excess Sec II :S\$

D.O.A : 26/12/2020 17:05

Place of Accident :

UPP SERANGOON ROAD > CITY AREA

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

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

Insured Liability :

%

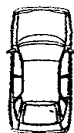
Final ? Yes / No

GBB 1595J

SKS 866M

SKG 1133B

SMP 3237B



INSRS:

WSP:

Tel :

Liability :

RMKS:

OI



INSRS:

WSP: VOLKSWAGEN

Tel :

Liability :

RMKS:

TP



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time		STAGE	DATE / PIC
	SKS 866M - NA/INC20014586/z4 ; 26/12/2020	Non-Reporting ltr (1st):	
	NBA/AIG20014570/Y ; 26/12/2020	Non-Reporting ltr (2nd):	
	GBB 1595J - CS3/AIG13023162/Sy3c3 ; 08/12/2013	Non-Reporting ltr (Final):	
	NBA/AIG20014570/Y ; 26/12/2020	Notification ltr (if non-pickup):	
		Call OI:	
		After call ltr to OI:	
22/04/2021	Pls refer to VIEWS for details.	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:	
Repair Cost: P/P S\$ 27,296.94 (13 days) Reduction: 34 %		Confirm by:	
		Email ☐ Call ☐	
FINAL SETTLEMENT Date/Time: 22/04/2021 Confirm with Meiy 28		Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. :	If NO or B 28, Ass. Lia : 0	
Repair Cost: w/GST	S\$ 29,207.73		
Loss of Rental (LOR) w/GST	S\$ 1,926.00 (15 days) x \$120.00		
Loss of Use (LOU):	S\$ (\$ x days)		
Loss of Income (LOI):	S\$ (\$ x days)		
LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]			
GIA/LTA Search	S\$ 2.00		
Medical:	S\$	1) Claim status: Normal/Reject/Private Settlement	
Disbursement:	S\$ 360.00 (IRoad Video Recorder) (e.g. Tow/Independent)	2) Report Format: TP	
Legal Cost	S\$	3) Survey fee: \$320.00	
Total:	S\$ 31,495.73	Global Sum S\$:	
FINAL PAYMENT Date/Time:		Confirm with:	
		Email ☒ Call ☐	
Payee 1:	S\$ 29,569.73	Name 1:	Volkswagen Group Singapore Pte Ltd
Payee 2: (Strike if N.A.)	S\$ 1,926.00	Name 2:	BKW Rent A Car Pte Ltd
Payee 3: (Strike if N.A.)	S\$	Name 3:	