15/5/2010

INS. CASE OWNER: CC4/AIG21003299/Aea3

LKK:

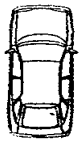
IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 15/06/2021 Date / Time : 12/03/2021

Registered in Merimen: 12/03/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : SFF 72P Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

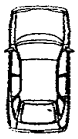
Excess Sec II :S$ D.O.A : 11/03/2021 12:30 Place of Accident :

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

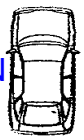
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

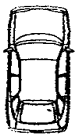
SGK 165S → → →



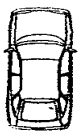
INSRS:
WSP:
Tel : MG SOLUTION
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SGK 165S - CS/FCI18001427/Avd3n2 ; 22/01/2018	**STAGE** **DATE / PIC**
	NA/AIG17013475/r3 ; 11/07/2017	Non-Reporting ltr (1st):
	NA/AIG18001333/r3 ; 22/01/2018	Non-Reporting ltr (2nd):
	NA/AIG21002894/h4 ; 02/03/2021	Non-Reporting ltr (Final):
	NA/AIG21003245/h4 ; 11/03/2021	Notification ltr (if non-pickup):
	NA/INC11019415/s2 ; 21/09/2011	Call OI:
	SFF 72P - NA/AIG21003245/h4 ; 11.03.2021	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: LWP
Repair Cost: P/P	S$ 979.30 (3 days)	Reduction: 87 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 16.09.21	Confirm with MS WONG	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 23	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 1,047.85	OI HIT TP PARKED VEH	
Loss of Rental (LOR):	S$ - (days)		
Loss of Use (LOU):	S$ 240.00 ($ 60 x 4 days)		
Loss of Income (LOI):	S$ - ($ x days)		
LOR only ☐ LOU only ☑	LOR + LOU ☐ LOR + LOI ☐	[**Tick only one**]	
GIA/LTA Search	S$ 7.45		
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: $320
Total:	**S$** 1,295.30	**Global Sum S$:**	

FINAL PAYMENT	Date/Time: 16.09.21	Confirm with: MS WONG	Email ☐ Call ☐
Payee 1:	S$ 1,295.30	Name 1:	MG SOLUTION PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	