15/5/2010

INS. CASE OWNER: CC6/AIG21006727/Ura3

LKK:

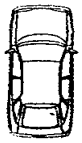
IDAC:

ASSIGNMENT

Surveyor: MARCUS DOI: 21/06/2021 Date / Time : 16/06/2021

Registered in Merimen: 16/06/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : SMH 5788G Claim No. :

Name of Insured : NG ZHI QIN Policy No. : 1900079463

Insured Tel No. : HP: Make / Model : Kia Cerato

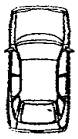
Excess Sec II :S$ D.O.A : 14/06/2021 18:30 Place of Accident : HOUGANG AVE 3 NEAR CHAO YING KONG TEMPLE

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

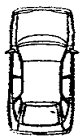
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

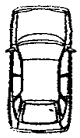
SKG 8398H → → →



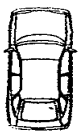
INSRS:
WSP: JIN AUTO
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SKG 8398H - NA/MSG15018376/d2 ; 27.10.2015	Non-Reporting ltr (1st):	
	SMH 5788G - CS/AIG21006724/Evf3 ; 14.06.2021	Non-Reporting ltr (2nd):	
	We have detected that there is already an active claim within 1 day of the Date of Loss.	Non-Reporting ltr (Final):	
	~~SKG8398H Date of Loss: 14/06/2021 (OD)~~ Insurer: MSIG Insurance (Singapore) Pte. Ltd.	Notification ltr (if non-pickup):	
		Call OI:	
		After call ltr to OI:	
	Please CONFIRM that this is NOT the same case you are creating.	**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:
Repair Cost: L/SUM	S$ 1,100.00 (3 days) Reduction: 61 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 25/8/2021 Confirm with JOUIS		Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL		If NO or B 28, Ass. Lia :
Repair Cost:	S$ 1,177.00		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 180.00 ($ 60 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$		1) Claim status: Normal/~~Reject/Private Settle~~
Disbursement:	S$ (e.g. Tow/ Independent)		2) Report Format: TP
Legal Cost	S$		3) Survey fee: 320.00
Total:	**S$** 1,357.00	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:		Confirm with:	Email ☐ Call ☐	
Payee 1:	S$ 1,357.00		Name 1:	Jin Auto Services Pte Ltd	
Payee 2: (Strike if N.A.)	S$		Name 2:		
Payee 3: (Strike if N.A.)	S$		Name 3:		