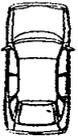|		LKK:
INS. CASE OWNER:	**CC6/AIG21010087/Aea3**	IDAC:

ASSIGNMENT

Surveyor: **ADRIAN** DOI: **28/09/2021** Date / Time : **28/09/2021**
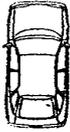
Registered in Merimen: **29/09/2021**

Pre-assign / CCU / FTE

Insured Vehicle No. :	**SBM 78J**	Claim No. :	
Name of Insured :		Policy No. :	
Insured Tel No. :	HP:	Make / Model :	
Excess Sec II :S$	D.O.A : **15/09/2021 19:45**	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**

SME 7078A ⟶ ⟶ ⟶

INSRS: WSP: **MG SOLUTION PTE LTD** Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:		INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	SME 7078A - X SBM 78J - CC4/AIG08014496/RDn ; 07.05.2008	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: **LWP**

Repair Cost: **L/S** S$ **3,400.00** (**3** days) Reduction: **72** % Email Call

FINAL SETTLEMENT Date/Time: **27.12.21** Confirm with **SU WONG** Email Call

Final Liability:	% **100** (Agreed / Assessed) BOLA S/N No. : **24**	If NO or B 28, Ass. Lia :
Repair Cost: **w/GST**	S$ **3,638.00** **OID EXIT PARKING LOT HIT TP**	
Loss of Rental (LOR):	S$ **-** (days)	
Loss of Use (LOU):	S$ **320.00** ($ **80** 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: **$320**
Total:	S$ **3,965.45** **Global Sum S$:** **3,960.00**	

FINAL PAYMENT Date/Time: **27.12.21** Confirm with: **SU WONG** Email Call

Payee 1:	S$ **3,960.00**	Name 1: **MG SOLUTION PTE LTD**
Payee 2: (Strike if N.A.)	S$	Name 2:
Payee 3: (Strike if N.A.)	S$	Name 3: