15/5/2010

INS. CASE OWNER:

CC4/III21011771/Tea3

LKK:

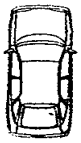
IDAC:

ASSIGNMENT

Surveyor: TAUFIKH DOI: 19/11/2021 Date / Time : 17/11/2021

Registered in Merimen: 18/11/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : SMJ 6421Y Claim No. : MPC2021D0004157

Name of Insured : Policy No. : D19MPC0001552_02

Insured Tel No. : HP: Make / Model :

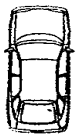
Excess Sec II :S$ D.O.A : 23/09/2021 20:40 Place of Accident :

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

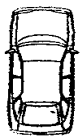
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

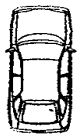
FBJ 4109T → → →



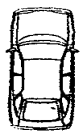
INSRS:
WSP: Pang Scooter Service
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	FBJ 4109T - X SMJ 6421Y - 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:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by: MTH

Repair Cost: L/S S$ 7,850.00 (4 days) Reduction: 30 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 12.04.22 Confirm with JASON Email ☐ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 15 If NO or B 28, Ass. Lia :

Repair Cost: S$ 7,850.00 OID CHANGED LANE HIT TP (PIR AGAINST OID)

Loss of Rental (LOR): S$ - (days)

Loss of Use (LOU): S$ 120.00 ($ 30 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$ -

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: $500

Total: **S$** 7,970.00 **Global Sum S$:**

FINAL PAYMENT Date/Time: 12.04.22 Confirm with: JASON Email ☐ Call ☐

Payee 1:	S$ 7,970.00	Name 1:	PANG SCOOTER SERVICE
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	