15/5/2010

INS. CASE OWNER: CC6/AIG22000506/Aga3

LKK:

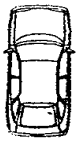
IDAC:

ASSIGNMENT

Surveyor: Adrian DOI: 12/01/2022 Date / Time : 14/01/2022

Registered in Merimen: 14/01/2022

Pre-assign / CCU / FTE



Insured Vehicle No. : SMW 6738R Claim No. : 4733671476SG

Name of Insured : Mr David Djaja Policy No. : 2070168750

Insured Tel No. : HP: Make / Model :

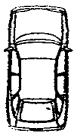
Excess Sec II :S$ D.O.A : 11/01/2022 Place of Accident : Claymore Rd

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

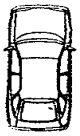
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

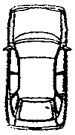
SMQ 4944G → → →



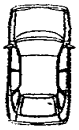
INSRS:
WSP: MG SOLUTION
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SMQ 4944G : X ; SMW 6738R : X	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 :	
	CLAIMANT - PRIME CAR LIMO PTE LTD	Medical Bill:	
		PIR:	
	TPV: H.GRACE - 1496cc	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: LS	S$ $6,100.00 (6 days) Reduction: $8,888.56 % 59		Email Call
FINAL SETTLEMENT	Date/Time: 27/06/2022	Confirm with SU	Email ✓ Cal
Final Liability:	% 90 (Agreed / Assessed)	BOLA S/N No. : 9	If NO or B 28, Ass. Lia :
Repair Cost: 6,527.00	S$ 5,874.30	W/GST	
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU): 400.00	S$ 360.00 ($ 50 x 8 days)		
Loss of Income (LOI):	S$ ✓ ($ x days)		
LOR only LOU only ✓	LOR + LOU LOR + LO	[**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: $320.00
Total:	**S$** 6,241.75	**Global Sum S$:** 6,200.00	

FINAL PAYMENT	Date/Time:	Confirm with:		Email ✓ Cal
Payee 1:	S$ 6,200.00	Name 1:	MG SOLUTION PTE LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:		
Payee 3: (Strike if N.A.)	S$	Name 3:		