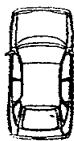


ASSIGNMENTSurveyor: KennethDOI: 27/06/2022Date / Time : 27/06/2022Registered in Merimen: 27/06/2022**Pre-assign / CCU / FTE**Insured Vehicle No. : GBH 2182D

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

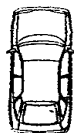
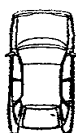
Excess Sec II :\$ _____ D.O.A : 23.06.2022 18:00Place of Accident : PIE > TUAS

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****SGU 9403T**INSRS:
WSP: OPTIMA
Tel : WERKZ
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	Reference Entry	Date	Customer Name	Vehicle No.	TP Vehicle No.	Accident Date	Close Date	Created By	DATE / PIC
SGU 9403T	CC4/AIG13016133/Kha3w2	10/12/2013	SGU 9403T	SGP 786Z	29/08/2013	26/12/2013	10/03/2022	10/03/2022	10/03/2022
GBH 2182D - X	CS/EQ122001181/Ktr3n2	10/03/2022	SGU 9403T	GBG 4711U	04/02/2022	10/03/2022	10/03/2022	10/03/2022	10/03/2022
We have detected that there is already an active claim within 1 day of the Date of Loss									Non-Reporting ltr (1st):
SGU9403T Date of Loss: 23/06/2022 (OD)									Non-Reporting ltr (2nd):
Insurer: MSIG Insurance (Singapore) Pte. Ltd.									Non-Reporting ltr (Final):
Please CONFIRM that this is NOT the same case you are creating.									Notification ltr (if non-pickup):
									Call OI:
									After call ltr to OI:
									Documentation Check List:
									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: <u>L/sum</u> S\$ <u>4,450.00</u> (<u>6</u> days) Reduction: <u>56</u> %									Email ☒ Call ☐
FINAL SETTLEMENT Date/Time: <u>11/10/2022</u> Confirm with <u>Kaitlyn</u>									Email ☒ Call ☐
Final Liability: % <u>100</u> (Agreed / Assessed) BOLA S/N No. : <u>27</u>									If NO or B 28, Ass. Lia :
Repair Cost: <u>w/GST</u> S\$ <u>4,761.50</u>									
Loss of Rental (LOR): S\$ _____ (_____ days)									
Loss of Use (LOU): S\$ <u>600.00</u> (\$ <u>100</u> x <u>6</u> days)									
Loss of Income (LOI): S\$ _____ (\$ _____ x _____ days)									
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]									
GIA/LTA Search S\$ <u>2.00</u>									
Medical: S\$ _____									1) Claim status: Normal/Reject/Private Settle
Disbursement: S\$ _____ (e.g. Tow/ Independent)									2) Report Format: <u>TP</u>
Legal Cost S\$ _____									3) Survey fee: <u>\$320.00</u>
Total: S\$ <u>5,363.50</u> Global Sum S\$:									
FINAL PAYMENT Date/Time: _____ Confirm with: _____ Email ☒ Call ☐									
Payee 1: S\$ <u>5,363.50</u> Name 1: <u>Optima Werkz Pte Ltd</u>									
Payee 2: (Strike if N.A.) S\$ _____ Name 2: _____									
Payee 3: (Strike if N.A.) S\$ _____ Name 3: _____									