15/5/2010

INS. CASE OWNER:

CC6/AIG22010196/Kpa3

LKK:

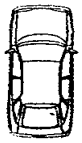
IDAC:

ASSIGNMENT

Surveyor: _____ DOI: _____ Date / Time : 14.10.2022

Registered in Merimen: 14.10.2022

Pre-assign / CCU / FTE



Insured Vehicle No. : GBF 6097B

Name of Insured : _____

Insured Tel No. : _____ HP: _____

Excess Sec II :S$ _____ D.O.A : 13.10.2022 08:50

Is driver the owner? (YES / NO)

Claim No. : _____

Policy No. : _____

Make / Model : _____

Place of Accident : _____

Nature of Accident : _____

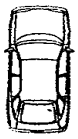
If **NO**, Driver Name / Age :

Driver Tel No. : (V/L: YES / NO)

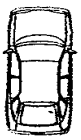
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % **Final ? Yes / No**

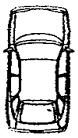
SMN 4687P → _____ → _____ → _____



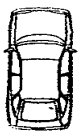
INSRS:
WSP: OPTIMA WERKZ
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
SMN 4687P - X	
GBF 6097B - Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By	
CC4/AIG19009248/Kda3q2 18/03/2020 SGA 1188Y GBF 6097B 24/05/2019 18/03/2020 HMK	
NA/AIG19006888/h4 18/04/2019 JOSHUA ALFONSO S/O LEFORT ALFONSE GBF 6097B SMJ 173K 17/04/2019 24/04/2019 LSH	
NBA/AIG20009234/Y 01/09/2020 MOHAMMED SIFLI BIN SALIM GBF 6097B SKG 711P 27/08/2020 08/09/2020 RBA	

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:

Repair Cost: L/SUM S$ 2,700.00 (4 days) Reduction: 57 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 19/04/2023 Confirm with Joseph Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: 7%GST	S$ 2,889.00	
Loss of Rental (LOR):	S$ (days)	
Loss of Use (LOU):	S$ 300.00 ($ 60 x 5 days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only ☐ LOU only ☑ LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]		
GIA/LTA Search	S$ 2.00	
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: $320.00
Total:	**S$** 3,191.00 **Global Sum S$:**	

FINAL PAYMENT Date/Time: Confirm with: Email ☑ Call ☐

Payee 1:	S$ 3,191.00	Name 1:	Optima Werkz Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	