

INS. CASE OWNER:

CC3 / LPC1600

7212

K3939

LKK:

IDAC:

Surveyor:

KENNETH

DOI:

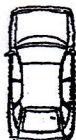
18.04.16

Date / Time:

18.04.16

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SJF 99084

Name of Insured:

Muhammad Khairul Bin Mohd Kemal

Insured Tel No.:

HP:

Claim No.:

1516/16/MP05/018648

Policy No.:

215VP 0500685

Make / Model:

KIA CARENS

Place of Accident:

OPEN C/P - CHONG PATIN MARKET

Excess Sec II :S\$

D.O.A.:

16.04.16

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

NORASTHEWAN BINTE MUHAMMAD AU

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

Driver Tel No.:

91287654

(V/L: YES / NO)

Insured Liability:

%

Final ? Yes / No

SHB 7912 S



INSRS:

WSP:

Tel:

Liability:

RMKS:

2mms - cab



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time	STAGE	DATE / PIC
16/04/16	Non-Reporting ltr (1st):	
16/04/16	Non-Reporting ltr (2nd):	
16/04/16	Non-Reporting ltr (Final):	
16/04/16	Notification ltr (if non-pickup):	
16/04/16	Call OI:	
16/04/16	After call ltr to OI:	
16/04/16	Documentation Check List: Handler Typist	
16/04/16	Notification ltr (if non-pickup)	
16/04/16	After call ltr to OI:	
16/04/16	Authorisation To Act:	
16/04/16	Release Voucher:	
16/04/16	Final Repair Bill:	
16/04/16	Car Rental Invoice:	
16/04/16	Towing Invoice	
16/04/16	LTA / GIA :	
16/04/16	Medical Bill:	
16/04/16	PIR:	
16/04/16	Mandate/Reject Instruction:	
16/04/16	LOD	
16/04/16	Payment Breakdown Form:	
16/04/16	Post-Repair Photos:	
16/04/16	Others:	
20/04/16	PRELIMINARY ADVICE	Date/Time: 20/04/16 Sent By: a3
20/04/16	FINALIZATION	Date/Time: 20/04/16 Confirm with: 23/04/16 Confirm by: Email Call
20/04/16	Repair Cost: L6	S\$ 1,800.00 (1.5 days) Reduction: 23 %
20/04/16	FINAL SETTLEMENT	Date/Time: 23/04/16 Confirm with: WAI YIN Email Call
20/04/16	Final Liability:	% 50 (Assessed / Assessed) BOLA S/N No. : 211
20/04/16	Repair Cost: \$126.00	S\$ 963.00
20/04/16	Loss of Rental (LOR): \$216.14	S\$ 108.07 (2 days) \$108.07
20/04/16	Loss of Use (LOU): -	S\$ - (\$ x days)
20/04/16	Loss of Income (LOI): -	S\$ - (\$ x days)
20/04/16	LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]	
20/04/16	GIA/LTA Search \$6.00	S\$ 6.00
20/04/16	Medical: -	S\$ -
20/04/16	Disbursement: -	S\$ - (e.g. Tow/ Independent)
20/04/16	Legal Cost -	S\$ -
20/04/16	Total: \$2,148.14	S\$ 1,074.07 Global Sum S\$: 1,050.00
20/04/16	FINAL PAYMENT	Date/Time: 20/04/16 Confirm with: Email Call
20/04/16	Payee 1:	S\$ 1,050.00 Name 1: TRANS-CAB AUTO SERVICES PTE LTD
20/04/16	Payee 2: (Strike if N.A.)	S\$ - Name 2: -
20/04/16	Payee 3: (Strike if N.A.)	S\$ - Name 3: -