

INS. CASE OWNER: Rian Chuan | CC6/AIG17022175 / Uhas

LKK:
IDAC:

Surveyor: MARCUS | DOI: 2/1/17 | Date / Time: 2/1/17
Registered in Merimen: 2/1/17

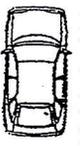
Pre-assign / CCU / FTE



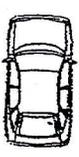
Insured Vehicle No. : SKP 6002R | Claim No. : 381807391659
Name of Insured : In The Estate of LAURENCE @ MARY LAI LI MING | Policy No. : 2100387331
Insured Tel No. : _____ | HP: _____ | Make / Model : _____
Excess Sec II :SS _____ | D.O.A : 12/1/17 | Place of Accident : _____
Is driver the owner? (YES / 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

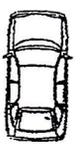
SLM 1776C



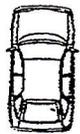
INSRS:
WSP: Pegasus
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	STAGE	DATE / PIC
<u>23/1/17 (vic)</u>	<u>SLM 1776C - X ; SKP 6002R - X</u> <u>OINR - SEND FIRST LETTER TO OI.</u> <u>- OO of OIA REPORT IN YET!</u>	Non-Reporting ltr (1st): Non-Reporting ltr (2nd): Non-Reporting ltr (Final): Notification ltr (if non-pickup): Call OI: After call ltr to OI: <u>19/1/18 - vic</u>
<u>4/1/18 @ 124hrs</u>	<u>Called 8264 6423, but no response</u>	Documentation Check List: Handler Typist
<u>24/1/18 : 1420 hrs</u>	<u>OI</u> <u>Still no GIA report Inget.</u> <u>OI OIA REPORT IN.</u>	Notification ltr (if non-pickup) <input type="checkbox"/> After call ltr to OI: <input checked="" type="checkbox"/> Authorisation To Act: <input checked="" type="checkbox"/> Release Voucher: <input checked="" type="checkbox"/> Final Repair Bill: <input checked="" type="checkbox"/> Car Rental Invoice: <input checked="" type="checkbox"/> Towing Invoice <input type="checkbox"/> LTA/GIA : <input checked="" type="checkbox"/> Medical Bill: <input type="checkbox"/> PIR: <input type="checkbox"/> Mandate/Reject Instruction: <input type="checkbox"/> LOD <input checked="" type="checkbox"/> Payment Breakdown Form: <input type="checkbox"/> Post-Repair Photos: <input type="checkbox"/> Others: <input type="checkbox"/>
<u>19-11-18</u>	<u>LIABILITY IS DOWN. TO EXPEDITE SETTLEMENT WITH TP</u> <u>- FINURZED</u>	
<u>19/1/18</u>	<u>MUG REVIEWED. OLD ADDRESS 4 HIT TP.</u> <u>SEND LETTER TO OI TO NOTIFY TP CLAIM</u> <u>W/ NCD ISSUES.</u>	
<u>19/1/18</u>	<u>TP LOD IN BY EMAIL</u>	
<u>20/1/18</u>	<u>SEND 1ST OFFER TO TP</u> <u>TP ACCEPTED OFFER. ALL DOCS IN ORDER</u> <u>- TO CLOSE.</u>	

PRELIMINARY ADVICE Date/Time: _____ Sent By: _____

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

Repair Cost: 49 S\$ 2,800.00 (3 days) Reduction: 02 % Email Call

FINAL SETTLEMENT Date/Time: 20/1/18 Confirm with: GRON Email Call

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

Repair Cost: (w/GST) S\$ 2,996.00

Loss of Rental (LOR): S\$ _____ (_____ days)

Loss of Use (LOU): S\$ 660.00 (\$ 110 x 6 days) CONVERTED \$84.95 + LOS 2900

Loss of Income (LOI): S\$ _____ (\$ _____ x _____ days)

LOR only LOU only LOR + LOU LOR + LOI [Tick only one]

GIA/LTA Search S\$ 9.25

Medical: S\$ _____

Disbursement: S\$ _____ (e.g. Tow/Independent)

Legal Cost S\$ _____

Total: S\$ 3,661.35 Global Sum S\$: 3,660.00

FINAL PAYMENT Date/Time: _____ Confirm with: _____ Email Call

Payee 1: S\$ 3,660.00 Name 1: PEGASUS ENGINEERING & TRADING PTE LTD

Payee 2: (Strike if N.A.) S\$ _____ Name 2: _____

Payee 3: (Strike if N.A.) S\$ _____ Name 3: _____

COPY SENT
20/1/18

- 1) Claim status: Normal/Reject/Private Settle
- 2) Report Format: _____
- 3) Survey fee: \$310.00