

INS. CASE OWNER:

Chee Heng

CC6 / AIG17022216

1 Aha3

LKK:

IDAC:

Surveyor:

AORIAN

DOI:

20/11/17

Date / Time:

20/11/17

Registered in Merimen:

21/11/17

Pre-assign / CCU / FTE



Insured Vehicle No.:

SDL 90D

Name of Insured:

TAN WEE HUAT

Insured Tel No.:

HP:

Claim No.:

4784390965SG

Policy No.:

2100473021

Make / Model:

AUDI A4 SEDAN 1.4 TFSI S

Place of Accident:

BUKIT TIMAH ROAD TOWARDS CTE

Excess Sec II :SS

D.O.A.:

16/11/17

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age: TAN CHONG HUI

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

Driver Tel No.: 9295 1021

(V/L YES / NO)

Insured Liability:

%

Final ? Yes / No

STH 3006D



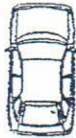
INSRS:

WSP: MG Solution

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

STH 3006D - NA/FWD17021982/13 DOA: 16/11/17
SDL 90D - NA/FWD17021982/13 DOA: 16/11/17

STAGE

DATE / PIC

23/11/17 (V.L.)

19/12/17 @ 1525hrs Called OI. Mr. Tan Wee Huat. He acknowledged the accident & noted NCO affected. Letter will be sent.

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:

19/12/17

26/03/18

02/05/18

15/05/18

21/05/18

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

46

S\$

7,800.00

(6 days)

Reduction:

47

%

Email

Call

FINAL SETTLEMENT

Date/Time:

21/05/18

Confirm with:

SU WONG

Email

Call

Final Liability:

%

100

(Agreed / Assessed) BOLA S/N No.:

27

If NO or B 28, Ass. Lia:

Repair Cost: (w/ GST)

S\$

8,346.00

(LOD REPAIR-ENDED TP)

Loss of Rental (LOR):

S\$

-

(days)

Loss of Use (LOU):

S\$

600.00

\$100 x

6

days)

Loss of Income (LOI):

S\$

-

(\$ x

days)

LOR only ☐ LOU only ☒LOR + LOU ☐LOR + LOI ☐

[Tick only one]

GIA/LTA Search

S\$

5.35

Medical:

S\$

-

Disbursement:

S\$

-

(e.g. Tow/ Independent)

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$320.00

Total:

S\$

8,951.35

Global Sum S\$:

8,950.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

8,950.00

Name 1:

MG SOLUTION PTE LTD

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

-

Payee 3: (Strike if N.A.)

S\$

-

Name 3:

-