

INS. CASE OWNER:

Inye

CC3 / CTI17022438 1 kha3

LKK:

IDAC:

Surveyor:

RALVIN

DOI:

23/11/17

Date / Time:

23/11/17

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SLB 1736B
 Name of Insured : SYLLYS AUTO PTE LTD
 Insured Tel No. : _____ HP: _____
 Excess Sec II : SS _____ D.O.A : 23/11/17
 Is driver the owner? (YES / NO) Nature of Accident : _____
 If NO, Driver Name / Age : NASARUDIN BIN ABUL RAHMAN
 Driver Tel No. : 9699 9478 (V/L: YES / NO)

Claim No. : SNM17D06771C02
 Policy No. : DMHCSN1712971700
 Make / Model : LEXUS IS250
 Place of Accident : RLK 215/216 BUKIT BATOK ST 21
CAMPARIC
 OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO
 Insured Liability : % Final ? Yes / No

SHA 7546X



INSRS:
WSP: COGE (loyal)
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/Time

DATE / TIME	STAGE	DATE / PIC
	Non-Reporting ltr (1st):	
	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
	Call OI: <u>25/11/17 > SH</u>	
	After call ltr to OI: <u>via on 02/02/18</u>	
	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:	☐
30/11/17 (V.L.)	SHA 7546X - CS/FCI15019212/16 DOA: 11/11/15 - CS/FCI17012762/Kha3 DOA: 24/06/17 - NS/INC13001255/Hlgan DOA: 16/01/13 - NS/INC17012622/Mikbm2 DOA: 24/06/17	
25/11/17 1039 hrs:	spoke to OI, SYLLYS AUTO PTE LTD & 9699 5693 informed OI, TP claims and NOO issue. OI mention OYO (hire) mention TP purposely hit into him when OI car was already half out. OI mention he have no CCTV footage to support the claim, OI mention they are still gathering information and will email over to us if they have it. Will sent letter.	
02/02/18	send letter to OI. BULKY TO TP FOR COW.	
27/03/18	TYPE REPORT FOR WARRANT APPROVAL, REPORT DONE. SEND WARRANT TO OI	
28/03/18	PRELIMINARY ADVICE Date/Time: 24/11/17 Sent By: Shidey Hsew - OI APPROVED WARRANT. SEND 1ST OFFER.	
FINALIZATION	Date/Time: Confirm with: Confirm by:	
Repair Cost: <u>RIP</u> S\$ <u>3,142.00</u> (3 days) Reduction: <u>15</u> %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 28/03/18 Confirm with: <u>WILLIAM</u> Email ☒ Call ☐	
Final Liability: % <u>100</u> (Agreed / Assessed) BOLA S/N No. : <u>NIL</u>	If NO or B 28, Ass. Lia :	
Repair Cost: (w/acc) S\$ <u>3,362.67</u>	<u>COMPUTING VERSIONS</u>	
Loss of Rental (LOR): S\$ <u>325.20</u> (2.5 days) X <u>129.28</u>	<u>- OI MOVING OUT FROM</u>	
Loss of Use (LOU): S\$ <u>125.00</u> (\$ 50 x 2.5 days)	<u>CLP LIT</u>	
Loss of Income (LOI): S\$ (\$ x days)		
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☒ [Tick only one]		
GIA/LTA Search S\$ <u>5.35</u>		
Medical: S\$ <u>-</u>	1) Claim status: <u>Normal</u> / Reject / Private Settle	
Disbursement: S\$ <u>-</u> (e.g. Tow / Independent)	2) Report Format:	
Legal Cost S\$ <u>-</u>	3) Survey fee: <u>\$400.00</u>	
Total: S\$ <u>3,816.22</u> Global Sum S\$ <u>3,810.00</u>		
FINAL PAYMENT	Date/Time: Confirm with: Email ☐ Call ☐	
Payee 1: S\$ <u>3,810.00</u> Name 1: <u>COMFORT DELGRO ENGINEERING PTE LTD</u>		
Payee 2: (Strike if N.A.) S\$ <u>-</u> Name 2: <u>-</u>		
Payee 3: (Strike if N.A.) S\$ <u>-</u> Name 3: <u>-</u>		