

15/5/2010

INS. CASE OWNER:

Kian Chuan

CC 3 / AIG170 23746 / Khaz

LKK:

IDAC:

Surveyor:

KENNETH

DOI:

13/12/17

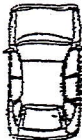
Date / Time:

13/12/17

Registered in Merimen:

14/12/17

Pre-assign / CCU / FTE



Insured Vehicle No.:

SKQ 4083P

Name of Insured:

TAN YEN KOK

Insured Tel No.:

HP: 9004 7048

Excess Sec II :S\$

D.O.A: 12/12/17

Is driver the owner?

(YES / NO)

Nature of Accident:

Claim No.:

2100393560

Policy No.:

2100393560

Make / Model:

MITSUBISHI OUTLANDER - 2.4 CVT (A)

Place of Accident:

BALESTIER ROAD

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

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

Insured Liability:

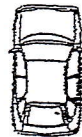
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Final ? Yes / No

GR 6580A

SKQ 4083P

SHB 7860H



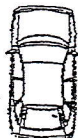
INSRS:

WSP:

Tel:

Liability:

RMKS:



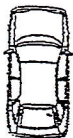
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP: Trans - C63 (AMC)

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/Time

SHB 7860H - CS/RST09017810/12/1 DOA: 08/03/09
SKQ 4083P - X
- PINKU300.

STAGE

DATE / PIC

20/12/17 (vic)

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI: 18/11/18 > SH HANA

After call ltr to OI: 19/01/18 - vic ok

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:

19/01/18

- send letter to OI
- for bulk attachment

05/04/18

- total @ TC. settled.

- ORIGINAL TP LOR IN.

12/08/18

- CONFIRMED AMOUNT STAY AS LOR.
- All docs IN ORDER.
- TO close.

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

1/9

S\$ 2,000.00

(2

days)

Reduction:

88

%

Email ☐ Call ☐

FINAL SETTLEMENT

Date/Time:

Confirm with

JEROME

Email ☐ Call ☐

Final Liability:

%

100

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

28

If NO or B 28, Ass. Lia:

0%.

Repair Cost:

(w/loss)

S\$ 2,140.00

Loss of Rental (LOR):

S\$ 245.63

(2.5

days)

x \$98.25

Loss of Use (LOU):

S\$ 125.00

(\$ 50

x 2.5

days)

Loss of Income (LOI):

S\$ -

(\$

x

days)

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

[Tick only one]

GIA/LTA Search

S\$

5.25

Medical:

S\$ -

Disbursement:

S\$ -

Legal Cost

S\$ -

(e.g. Tow/Independent)

Total:

S\$ 2,515.98

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☐ Call ☐

Payee 1:

S\$

2,515.98

Name 1:

TRANS-CAP AUTO SERVICES PTE LTD

Payee 2: (Strike if N.A.)

S\$ -

Name 2:

Payee 3: (Strike if N.A.)

S\$ -

Name 3:

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$320.00