

15/5/2010

INS. CASE OWNER:

wanlong

CC4/AXA1702

4108, 5 hbz

LKK:

IDAC:

Surveyor:

SUBKOTIAN

DOI:

ASSIGNMENT

26/12/17

Date / Time:

18/1/17

Registered in Merimen:

18/1/17

Pre-assign / CCU / FTE

PC 3868M

Claim No.:

10467777

Insured Vehicle No.:

Policy No.:

GA2793N

Name of Insured:

REN QUAN TRANSPORT

Insured Tel No.:

HP:

Make / Model:

ISUN

Excess Sec II :S\$

D.O.A.:

14/12/17

Place of Accident:

ADMIRALTY RD

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

HELLIANI MURULISAN

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

Driver Tel No.:

(V/L: YES / NO)

Insured Liability:

%

Final ? Yes / No

CB 77H

INSRS:

WSP:

Tel:

Liability:

RMKS:

RVS

NON-MAC

INSRS:

WSP:

Tel:

Liability:

RMKS:

INSRS:

WSP:

Tel:

Liability:

RMKS:

INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

27/12/17
VICCB 77H - X PC 3868M - X
"pls retrieve old driving licence and TP video footage."- TO ADP COR FOOTAGE.
- FINALISED.
- FIVE REQUESTED. OLD GOING STRAIGHT.
- TP TURNING. TRAFFIC LIGHT PROBLEM.
- REQUESTED TO COR IF ANY.
- EMAIL CAPABILITY UNCLARIFIED.

11/01/18

24/1/18 @ 1530 hrs: spoke to OI, Ren Quan Transport, informed that person in charge of handling PC 3868M was on 1/2 day leave. Will try to call again tom.

25/1/18 @ 1029 hrs: called OI, (person in charge) Mr Mac Lia 6759 2222 but no response. Will send letter.

12/02/18

- SEND LETTER TO OI.

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI: 25/1/18 24

After call ltr to OI: 12/02/18 - MC

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:

PRELIMINARY ADVICE

Date/Time:

27/12/17

Sent By:

b3

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

L6

S\$

8,550.00

(8 days)

Reduction:

38

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with

Email

Call

Insured Liability:

%

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

NIL

If NO or B 28, Ass. Lia:

CONFIRMING VERSIONS

Repair Cost:

S\$

-

Loss of Rental (LOR):

S\$

-

(days)

Loss of Use (LOU):

S\$

-

(\$

x

days)

Loss of Income (LOI):

S\$

-

(\$

x

days)

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

S\$

-

Medical:

S\$

-

Disbursement:

S\$

-

(e.g. Tow/ Independent)

Legal Cost

S\$

-

Total:

S\$

Global Sum S\$:

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

b550.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

-

Name 1:

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

Payee 3: (Strike if N.A.)

S\$

-

Name 3:

(1/2)

