

15/5/2010

INS. CASE OWNER:

Inure

CC 3 / CTI 170 245631 K1H5202

LKK:

IDAC:

Surveyor:

KALVIN

DOI:

27/12/17

Date / Time:

27/12/17

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

GBB 1356H

Name of Insured:

RED SWIFT SERVICES LLP

Insured Tel No.:

HP: 9693 2262

Excess Sec II :S\$

D.O.A: 24/12/17

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age: YEO ZHI LU

Driver Tel No.: 9467 9723

(V/L: YES / NO)

Claim No.:

SNH17007260002/6

Policy No.:

DMCVSN 3064331701

Make / Model:

CITROEN DISPATCH

Place of Accident:

NORTH BRIDGE RD TWDS BUKITS

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

Insured Liability: % Final ? Yes / No

SHD 3396Y



INSRS:

WSP: CD46 Claims

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



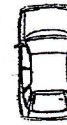
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time	STAGE	DATE / PIC
28/12/17 (w.c)	SHD 3396Y - CS/FCI14021280/Agbk3 DOA: 08/11/14	Non-Reporting ltr (1st):
	- NA/CTI17024385/h4 DOA: 24/12/17	Non-Reporting ltr (2nd):
	- NS/INC16006142/Higbd1 DOA: 01/04/16	Non-Reporting ltr (Final):
	GBB 1356H - CC3/CTI17015847/K1H5202 DOA: 08/08/17	Notification ltr (if non-pickup):
	- NA/CTI17014306/h4 DOA: 24/07/17	Call OI:
	- NA/CTI17024585/h4 DOA: 24/12/17	After call ltr to OI: 04/01/18 - vic ok
02/01/18 @ 2:30pm	can oib co. u oib, NO RESPONSE.	Documentation Check List: Handler Typist
	PINAKED.	Notification ltr (if non-pickup)
04/01/18	SEND LETTER TO OI.	After call ltr to OI:
	ORIGINAL TO LOD IN.	Authorisation To Act:
16/01/18	TYPE REPORT FOR WANDATE APPROVAL	Release Voucher:
	REPORT DONE.	Final Repair Bill:
14/02/18	BOOK WANDATE BY MUMU	Car Rental Invoice:
	RECEIVED 16 JAN 2018	Towing Invoice
14/02/18	OTI APPROVED WANDATE.	LTA/GIA:
20/02/18	SEND 1st OFFER TO TP.	Medical Bill:
21/02/18	RECEIVED ORIG. PV. ACCEPTED OFFER.	PIR:
	ALL BOOK IN ORDER.	Mandate/Reject Instruction:
	TO CLOSE.	LOD
		Payment Breakdown Form:
		Post-Repair Photos:
		Others:

PRELIMINARY ADVICE Date/Time: 28/12/17

Sent By: es

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: 4/4	S\$ 2,480.83 (3 days) Reduction: 63 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Final Liability: %	100 (Agreed / Assessed) BOLA S/N No.:	WILLIAM 27	If NO or B 28, Ass. Lia:
Repair Cost: (w/cost)	S\$ 2,654.49		COIP RMR - ENDS TP
Loss of Rental (LOR):	S\$ 674.00 (5 days) x 125.40		
Loss of Use (LOU):	S\$ 150.00 (\$ 50 x 5 days)		
Loss of Income (LOI):	S\$ - (\$ x days)		
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☒ [Tick only one]			
GIA/LTA Search	S\$ 7.49		1) Claim status: Normal/Reject/Private Settle
Medical:	S\$ -		2) Report Format:
Disbursement:	S\$ - (e.g. Tow/ Independent)		3) Survey fee: \$400.00
Total:	S\$ 3,538.98	Global Sum S\$: 3,530.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S\$ 3,530.00	Name 1: COMFORT BELGRO ENGINEERING PTE LTD	
Payee 2: (Strike if N.A.)	S\$ -	Name 2:	
Payee 3: (Strike if N.A.)	S\$ -	Name 3:	