

INS. CASE OWNER:

CL

CC 4 / ASM1800 2530

1 p/was 2

IDAC:

30003

ASSIGNMENT

Surveyor:

RANU

DOI:

9/1/18

Date / Time:

7/2/18

Registered in Merimen:

Pre-assign / CCU / FTE

FBG 9474X

Claim No.:

S8M008K1

Policy No.:

P1271850

Make / Model:

YAMAHA P216

Place of Accident:

PURE GROVE SMOUL SWAI RISE

Insured Vehicle No.:

Name of Insured:

LIU JIASEN. JONATHAN

Insured Tel No.:

HP:

97396596

Excess Sec II :SS

D.O.A.:

06/02/18

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

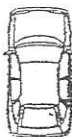
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SLC 5602Y



INSRS:

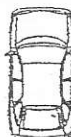
WSP:

Tel:

Liability:

RMKS:

Borneo



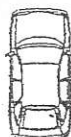
INSRS:

WSP:

Tel:

Liability:

RMKS:



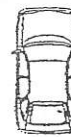
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

9/1/18

MINAN

14/022018 @ 4.07pm

SLC5602Y. X: FBG 9474X - X

Spoke to OTO (Mr Jonathan). confirmed accident details and OTO rear-ended TP. OTO will send any additional photos via email. Informed abt TP claim, aware of LCB issue and agreed to settle. Send letter to OTO

2 no photos in view

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

715022018

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:

PRELIMINARY ADVICE

Date/Time:

Sent By:

6/6

8/6/18

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

S\$

(

days)

Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with:

Email

Call

Final Liability:

% 100

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

27

If NO or B 28, Ass. Lia:

(OTO rear-ended TP)

Repair Cost:

S\$ 3830.16

Loss of Rental (LOR):

S\$

(

days)

Loss of Use (LOU):

S\$ 400.00

(\$ 80

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\$ 2.00

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

Total:

S\$ 3332.16

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$ 3332.16

Name 1:

Borneo Motors (Singapore) 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:

COPY SENT 6/8/18