

INS. CASE OWNER:

NATALIE

CC 6 / III 1800 2667, KUB39

LKK:

IDAC:

Surveyor:

Elneth

DOI:

ASSIGNMENT

8/2/18

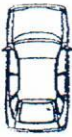
Date / Time:

8/2/18

Registered in Merimen:

9/2/18

Pre-assign / CCU / FTE



Insured Vehicle No.:

SHC 3654H

Name of Insured:

CTP

Insured Tel No.:

HP:

Excess Sec II : \$\$

D.O.A.:

5/2/18

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age: Lenny 45 years

Driver Tel No.:

(V/L: YES / NO)

Claim No.:

MCT 18020183

Policy No.:

M10W015

Make / Model:

MUMBAH

Place of Accident:

EXIT OF MUMBAH ALTA X
ORIN AR20 RD

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

Insured Liability:

%

Final ? Yes / No

SGV 94397



INSRS:

WSP:

Tel:

Liability:

RMKS:

POON
GIANG
SEOW

INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time		STAGE	DATE / PIC
12/2/18	SGV 94397 - 4	Non-Reporting ltr (1st):	
	CHC 7664H - no / (MUMBAH 2431) Higher down 26/6/18	Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
15/02/18	PIR REVIEWED. OLD RATE - ENDED TP.	Call OI:	
	SEK LIABILITY WARRANT.	After call ltr to OI:	
21/02/18	III AGREED TO.	Documentation Check List:	Handler Typist
22/02/18	EMAIL LIABILITY CLARK.	Notification ltr (if non-pickup)	
	FINANCED.	After call ltr to OI:	
	TP LOG IN BY EMAIL.	Authorisation To Act:	
22/02/18	TP REPORT FOR WARRANT APPROVAL	Release Voucher:	
	REPORT DONE.	Final Repair Bill:	
28/02/18	SEK WARRANT APPROVAL BY MUMBAH.	Car Rental Invoice:	
	III APPROVED WARRANT.	Towing Invoice:	
01/03/18	SEND 1st OFFER TO TP	LTA / GIA:	
	TP ACCEPTED OFFER.	Medical Bill:	
06/03/18	ALL DOCS IN ORDER.	PIR:	
	TO CLOSE.	Mandate/Reject Instruction:	
		LOD	
		Payment Breakdown Form:	
		Post-Repair Photos:	
		Others:	

PRELIMINARY ADVICE		Date/Time:	Sent By:		
FINALIZATION		Date/Time:	Confirm with:	Confirm by:	
Repair Cost:	L16	SS 1,400.00	(3 days)	Reduction:	69 %
FINAL SETTLEMENT		Date/Time:	Confirm with:	Email	Call
Final Liability:	%	100	(Agreed / Assessed)	BOLA S/N No.:	27
Repair Cost:	SS	1,400.00			
Loss of Rental (LOR):	SS	-	(days)		
Loss of Use (LOU):	SS	200.00	(100 x 3 days)		
Loss of Income (LOI):	SS	-	(\$ x days)		
LOR only	☐	LOU only	☒	LOR + LOU	☐
GIA/LTA Search	SS	7.45			
Medical:	SS	-			
Disbursement:	SS	-	(e.g. Tow/ Independent)		
Legal Cost	SS	-			
Total:	SS	1,707.45	Global Sum SS:	-	
FINAL PAYMENT		Date/Time:	Confirm with:	Email	Call
Payee 1:	SS	1,707.45	Name 1:	POON GIANG SEOW	
Payee 2: (Strike if N.A.)	SS	-	Name 2:	-	
Payee 3: (Strike if N.A.)	SS	-	Name 3:	-	