

15/5/2010

INS. CASE OWNER:

NORSAH

CC6 / AIG18002967 / 443

LKK:

IDAC:

ASSIGNMENT

Surveyor:

ADRIAN

DOI:

12/02/18

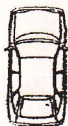
Date / Time :

12/02/18

Registered in Merimen:

13/02/18

Pre-assign / CCU / FTE



Insured Vehicle No. : SLS 3023Y

Claim No. : 13694657659

Name of Insured : CHAN WEN YAN

Policy No. : 1700060054

Insured Tel No. : HP: 9054 4346

Make / Model : MAZDA 6

Excess Sec II :SS D.O.A : 02/02/18

Place of Accident : SERANGGON RD AFTER WHAMPOA RIVER

Is driver the owner? (YES / NO) Nature of Accident :

If NO, Driver Name / Age :

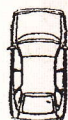
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. :

(V/L: YES / NO)

Insured Liability : % Final ? Yes / No

SLL 4966U

INSRS:
WSP: MG Solution
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/Time		STAGE	DATE / PIC
21/02/18 (vic)	SLL 4966U - X ; SLS 3023Y - X # NO estimate	Non-Reporting ltr (1st):	
		Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
24/14/2018 (CPK) 1pm	Spoke to OI (Ms Chan) at 9054 4346, she confirmed the accident statement and inform her about the TP claim. OI say she has no HCD affected as she only renewed one year, next year not going to renew and cut off the line. will send letter to her for her reference. - PROPOSED. - TP LOD IN BY EMAIL	Notification ltr (if non-pickup):	
		Call OI:	24/04/18 - CPK
		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:	
30/10/18 31/10/18	- SEND 1ST OFFER TO TP. - TP REQUESTED OFFER. PROPOSE 10 DAYS LOU DUE TO CHY.		
17/01/19 18/01/19 11/03/19	- SEND 2ND OFFER TO TP. - TP REQUESTED OFFER. - SEND ACCEPTANCE EMAIL TO TP. - ALL DONE IN ORDER. - TO CLOSE.		
PRELIMINARY ADVICE	Date/Time:	Sent By:	

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: 46	SS 6,600.00 (5 days) Reduction: 64 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 11/06/19	Confirm with: GU WONG	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. :		If NO or B 28, Ass. Lia :
Repair Cost: (w/650)	SS 7,062.00		COI CHARGED (445)
Loss of Rental (LOR):	SS (days)		
Loss of Use (LOU):	SS 570.00 x 9 days		
Loss of Income (LOI):	SS (\$ x days)		
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LO ☐ [Tick only one]			
GIA/LTA Search	SS 7.45		
Medical:	SS -		
Disbursement:	SS - (e.g. Tow / Independent)		
Legal Cost	SS -		
Total:	SS 7,609.45	Global Sum SS: -	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	SS 7,609.45	Name 1: MG SOLUTION PTE LTD	
Payee 2: (Strike if N.A.)	SS -	Name 2: -	
Payee 3: (Strike if N.A.)	SS -	Name 3: -	