

INS. CASE OWNER:

CC 6/QBE1800 2072, Rth 163/18

LKK:

IDAC:

Surveyor:

Ramy

DOI:

ASSIGNMENT

16/1/18

Date / Time:

15/1/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : PC 40337

Name of Insured : Bicom plc

Insured Tel No. : HP:

Excess Sec II : \$ D.O.A : 14/1/18

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

If NO, Driver Name / Age : TUNGGU ISMAIL (KANDAR BIN TUNGGU

Driver Tel No. : (V/L: YES NO) 0 MARK

Claim No. : VC011197

Policy No. : 8-V0013799 - MVR ROOM

Make / Model : M550N

Place of Accident : TAN BAHAR.

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

Insured Liability : % Final ? Yes / No

sgn 36m9

INSRS: WSP: vi sheng
Tel :
Liability :
RMKS:INSRS: WSP:
Tel :
Liability :
RMKS:INSRS: WSP:
Tel :
Liability :
RMKS:INSRS: WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
2/3/18	sgn 36m9 - x	Non-Reporting ltr (1st):	
	pc 40337 - x	Non-Reporting ltr (2nd):	
	Spoke to OI (Mr. Ismail). Confirmed accident details and OI rear-ended TP. OI will send any additional photos via email. Informed abt TP claim, aware of web issues and agree to settle. Send letter to OI.	Non-Reporting ltr (Final):	
02032018 @ 2.42pm		Notification ltr (if non-pickup):	
		Call OI: 902032018	ch 7/3/18
		After call ltr to OI: 1. 2.	
		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:	☐ ☐

10/08/19	- TYPE REPORT WHILE PENDING LOD
	- REPORT DONE
	- TP LOD IN BY EMAIL
16/10/19	- BOOK MANDATE APPROVAL TO QBE
17/10/19	- QBE APPROVED MANDATE
	- SEND 1st OFFER TO TP.
11/12/19	- TP ACCEPTED OFFER.
	- ALL DOCS IN ORDER
	- TO CLOSE

PRELIMINARY ADVICE	Date/Time: 26/1/18	Sent By: tam
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PRELIMINARY ADVICE Date/Time: 26/1/18

Sent By: tam

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: 46	\$S 2,000.00	(4 days) Reduction: 46 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time:	Confirm with:	Email ☒ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27	
Repair Cost:	\$S 2,000.00		
Loss of Rental (LOR):	\$S -	(days)	
Loss of Use (LOU):	\$S 210.00 (\$60 x 4 days)		
Loss of Income (LOI):	\$S - (\$ x days)		
LOR only ☐ LOU only ☒	LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	\$S 7.45		
Medical:	\$S -		
Disbursement:	\$S -	(e.g. Tow/ Independent)	
Legal Cost	\$S -		
Total:	\$S 2,217.45	Global Sum \$S: -	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	\$S 2,217.45	Name 1: LI SHONG AUTOMOBILE TRADING	
Payee 2: (Strike if N.A.)	\$S -	Name 2: -	
Payee 3: (Strike if N.A.)	\$S -	Name 3: -	