

15/5/2010

INS. CASE OWNER:

CAN LKNG

CC 4/AXA1800 3789, A WANG

LKK:

IDAC:

Surveyor:

Adrian

DOI:

ASSIGNMENT

2/2/18

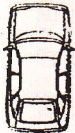
Date / Time:

M/M/18

Registered in Merimen:

2/2/18

Pre-assign / CCU / FTE



Insured Vehicle No.:

SHC 5A44H

Name of Insured:

TRANS-UPS SERVICES PM

Insured Tel No.:

HP:

Excess Sec II :S\$

25000

D.O.A.:

15/2/18

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

LEE THIAN SEE

Driver Tel No.:

(V/L) YES / NO

Claim No.:

1047011

Policy No.:

VPS (P1680520)

Make / Model:

KONNITT

Place of Accident:

578 Tampines Rd CP

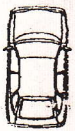
OI GIA REPORT YES / NO ; TP GIA REPORT YES / NO

Insured Liability:

%

Final ? Yes / No

SGE MOFF



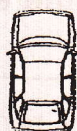
INSRS:

WSP:

Tel:

Liability:

RMKS:

MG
solution

INSRS:

WSP:

Tel:

Liability:

RMKS:



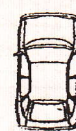
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time		STAGE	DATE / PIC
7/2/18	SGE MOFF - 4	Non-Reporting ltr (1st):	
	SHC 5A44H - 40/42/44/46/48/50/52/54/56/58/60/62/64/66/68/70/72/74/76/78/80/82/84/86/88/90/92/94/96/98/100	Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	
		After call ltr to OI:	13/02/19 - OK
13/02/19		Documentation Check List:	Handler Typist
		Notification ltr (if non-pickup)	☐
		After call ltr to OI: (EMAIL)	☒
		Authorisation To Act:	☒
		Release Voucher:	☒
13/02/19		Final Repair Bill:	☒
		Car Rental Invoice:	☐
25/02/19		Towing Invoice:	☐
16/03/19		LTA / GIA:	☒
23/03/19		Medical Bill:	☐
05/04/19		PIR:	☐
		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: LK	S\$ 11,700.00 (7 days)	Reduction: 52 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 05/04/19	Confirm with: SHKON	Email ☒ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No.:	NIL
Repair Cost: (w/acc)	S\$ 12,519.00		
Loss of Rental (LOR):	S\$ - (days)		
Loss of Use (LOU):	S\$ 1,000.00 x 10 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\$ 13,526.45	Global Sum S\$:	-
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S\$ 13,526.45	Name 1:	MG SOLUTION PTE LTD
Payee 2: (Strike if N.A.)	S\$ -	Name 2:	-
Payee 3: (Strike if N.A.)	S\$ -	Name 3:	-