

15/5/2010

INS. CASE OWNER:

CC 4/AIG1800

5168, 12/1/18

ds3

LKK:

IDAC:

Surveyor:

Tantikh

DOI:

ASSIGNMENT

21/3/18

Date / Time :

20/3/18

Registered in Merimen:

20/3/18

Pre-assign / CCU / FTE

SLJ 1341P



Insured Vehicle No. :

Claim No. :

Name of Insured :

Policy No. :

Insured Tel No. :

HP:

Make / Model :

Excess Sec II :S\$

D.O.A :

17/3/18

Place of Accident :

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

875 22485

INSRS:
WSP:
Tel :
Liability :
RMKS:Car
LifeINSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time

875 22485 - 16/04/2020 15:00
SLJ 1341P - x

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

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:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

S\$ 6,400.00

(6 days)

Reduction: 58

%

Email

Call

FINAL SETTLEMENT

Date/Time: 28/04/2020

Confirm with Tan

Email

Call

Final Liability:

100

(Agreed / Assessed) BOLA S/N No. : 27

If NO or B 28, Ass. Lia :

Repair Cost:

S\$ 6,400.00

Loss of Rental (LOR):

S\$ 1,170.00

(9 days)

x \$130

Loss of Use (LOU):

S\$ -

(\$

x

days)

Loss of Income (LOI):

S\$ -

(\$

x

days)

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

S\$ -

Medical:

S\$ -

Disbursement:

S\$ -

(e.g. Tow/Independent)

Legal Cost

S\$ -

1) Claim status: Normal

2) Report Format: TP

3) Survey fee: \$320

Total:

S\$ 7,570.00

Global Sum S\$: 7,500.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$ 7,500.00

Name 1:

Car Life Auto Engineering Services

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3: