

15/5/2010

INS. CASE OWNER:

CC 6 / CTI1800 5404, 4/16/18

LKK:
IDAC:

Surveyor:

MARCUS

DOI:

ASSIGNMENT

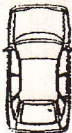
27/7/18

Date / Time :

27/7/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

SJS 3934

Name of Insured :

AMM HONG PERN

Insured Tel No. :

HP:

97889919

Excess Sec II : \$

D.O.A :

27/7/18

Is driver the owner?

(YES / NO)

Nature of Accident:

Claim No. :

SNM 18001542-005

Policy No. :

AMP 25M3 098161500

Make / Model :

MERCEDES

Place of Accident :

AMP ST 41 TURNING TO
AMP AVE 8

If NO, Driver Name / Age :

Driver Tel No. :

(V/L) YES / NO

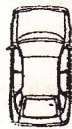
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability :

%

Final ? Yes / No

SJC 49372



INSRS:

WSP:

Tel :

Liability :

RMKS:

Fastech



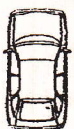
INSRS:

WSP:

Tel :

Liability :

RMKS:



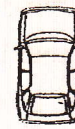
INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date / Time

16/7/18
AMM28032018 @
12:28 pm.

SJC 49372-x

SJS 3934-f

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:

13/06/18

TYPE REPORT FOR WILMATE APPROVAL.
REPORT DONE

10/7/18

GIVE WILMATE APPROVAL TO OI BY MAIL.
CCI APPROVED WILMATE.

18/6/18

SEND 1st OFFER TO TP
TP ACCEPTED OFFER.

07/08/18

RECEIVED PV. ALL FOC IN ORDER.
TO CLOSE.

PRELIMINARY ADVICE

Date/Time:

13/06/18

Sent By:

VIC

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

46

\$

15,000.00 (10

days) Reduction:

68

%

Email

Call

FINAL SETTLEMENT

Date/Time:

30/06/18

Confirm with:

SKRON

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No. :

9d-

If NO or B 28, Ass. Lia :

Repair Cost:

(w/ass)

\$

16,050.00

Loss of Rental (LOR):

\$

-

(days)

Loss of Use (LOU):

\$

720.00 (\$ 60 x 12

days)

Loss of Income (LOI):

\$

-

(\$ x days)

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

\$

2.00

Medical:

\$

-

Disbursement:

\$

-

Legal Cost

\$

-

(e.g. Tow/ Independent)

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$400.00

Total:

\$

16,772.00

Global Sum \$:

16,650.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

\$

16,650.00

Name 1:

FASTTECH AUTO PTE LTD

Payee 2: (Strike if N.A.)

\$

-

Name 2:

-

Payee 3: (Strike if N.A.)

\$

-

Name 3:

-