

CS/CTI18001519/R1ube2

15/5/2010

INS. CASE OWNER:

Boon Sen

CS/CTI18001519 / UKS3-1

LKK:
IDAC:

ASSIGNMENT

Surveyor:

Marave

DOI:

02/02/13

Date / Time :

02/02/13

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

SKD 9284L

Name of Insured :

Insured Tel No. :

HP:

Excess Sec II :S\$

D.O.A :

21/01/13

Is driver the owner?

(YES / NO)

Nature of Accident :

Claim No. :

Policy No. :

Make / Model :

Place 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

SKD 9775X



INSRS:

WSP: Fastech Auto

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/Time	STAGE	DATE / PIC
SKD 9775X - CS/CTI18001519/R1ube2 DOA: 21/01/13	Non-Reporting ltr (1st):	
SKD 9284L - CS/CTI18002253/Gad2 DOA: 21/01/13	Non-Reporting ltr (2nd):	
CS/CTI18001519/UKS3-1 DOA: 21/01/13	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:	Confirm by:
FINALIZATION Date/Time:	Confirm with:	Confirm by:
Repair Cost: L/S\$ 11,000 (7 days) Reduction: 12,805.40/54%		Email <input type="checkbox"/> Call <input type="checkbox"/>
FINAL SETTLEMENT Date/Time: 6/10/2020 Confirm with JASON		Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : NIL		If NO or B 28, Ass. Lia : 100
Repair Cost: (w/ GST) \$ 11,770.00		Insured proceeded when traffic light was
Loss of Rental (LOR): \$ 960.00 (8 days) X \$120		amber and traffic light is in
Loss of Use (LOU): \$ (\$ x days)		favour of third party
Loss of Income (LOI): \$ (\$ x days)		
LOR only <input checked="" type="checkbox"/> LOU only <input type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LO <input type="checkbox"/> [Tick only one]		
GIA/LTA Search \$ 2.00		1) Claim status: Normal/Reject/Private Settle
Medical: \$		2) Report Format: TP
Disbursement: \$ (e.g. Tow/ Independent)		3) Survey fee: \$180 (\$ 400 - \$220 (wp- t/loss))
Legal Cost \$		
Total: \$ 12,732.00 Global Sum \$: 12,700.00		Email <input type="checkbox"/> Call <input type="checkbox"/>
FINAL PAYMENT Date/Time:	Confirm with:	
Payee 1: \$ 12,700.00	Name 1: FASTECH AUTO PTE LTD	
Payee 2: (Strike if N.A.) \$	Name 2:	
Payee 3: (Strike if N.A.) \$	Name 3:	

