

MS. CASE OWNER:

SHERINI

CC 3 / III1800 6738

A ha3 G

LKK:

IDAC:

Surveyor:

APRIAN

DOT:

23/04/18

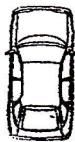
Date / Time:

11-4-18

Registered in Merimen:

11-4-18

Pre-assign / CCU / FTE



Insured Vehicle No.:

SHD 6502M

Name of Insured:

MPL

Insured Tel No.:

HP:

Excess Sec II : S\$

D.O.A.:

2/4/18

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Lee Bee Ery

Driver Tel No.:

(V/L: YES / NO)

Claim No.:

MOT18040317

Policy No.:

MCOMUN

Make / Model:

H.140

Place of Accident:

PIE 7 CHANGI

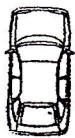
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SLV 7575D



INSRS:

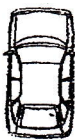
WSP:

Tel:

Liability:

RMKS:

Ch wri



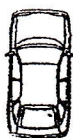
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

12/4

MC

SLV 7575D - X; SHD 6502M - 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:

P/P

S\$

2,954.70

(4

days)

Reduction:

19

%

Email

Call

FINAL SETTLEMENT

Date/Time:

08/08/18

Confirm with

MARK LOR

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

27

If NO or B 28, Ass. Lia:

Repair Cost:

(w/gst)

S\$

4,731.74

COIP ROAD-ENDED TP

Loss of Rental (LOR):

S\$

-

(days)

Loss of Use (LOU):

S\$

240.00

(\$ 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\$

-

Medical:

S\$

-

Disbursement:

S\$

-

Legal Cost

S\$

-

Total:

S\$

4,471.74

Global Sum S\$:

-

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

4,471.74

Name 1:

CYCLE 4 CATERPILLAR: PULCO MOTOR DEALER PTE LTD

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

-

Payee 3: (Strike if N.A.)

S\$

-

Name 3:

-

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$350.00