

15/5/2010

INS. CASE OWNER:

CC 3 / CTI1800

LKK:

IDAC:

Surveyor:

Edwin

DOI:

ASSIGNMENT

16/4/18

Date / Time:

16/4/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SJP 7941K

Name of Insured:

LEWTOX AMBULANCE P/L

Insured Tel No.:

HP:

Excess Sec II :S\$

D.O.A.:

12/4/18

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Mew Wah Seng

Driver Tel No.:

(V/L: YES / NO)

Claim No.:

SMM1800193302/11/18/18

Policy No.:

DMCEN 1807221820

Make / Model:

NISSAN

Place of Accident:

UTB TRNS LRY.

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

Insured Liability:

%

Final ? Yes / No

SJB 7776X

SJB 7776X

SJP 7941K

SKL 8716B



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



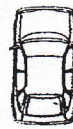
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

WSP: 100%
Tel: 4
Liability: TP

Date / Time		STAGE	DATE / PIC
19/4/18	SKL 8716B - 4	Non-Reporting ltr (1st):	
		Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
3/5/2018	Call OJD at 9838 0683, no body pickup. tomorrow will call again.	Call OI:	4/5/2018 Jic-OK 7/5
4/5/2018	Spoke to OJD (Mr Chew) at 9838 0683. OJD confirmed about the accident statement.	After call ltr to OI:	
9:45am	Spoke to Mr Ronie Tong (Lester Ambulance), informed him about TP claim and HCD issue. Agreed to settle and aware the HCD issue. send letter to OI.	Documentation Check List:	Handler Typist
9:50am		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: TP SCENE PHOTOS	☒

PRELIMINARY ADVICE Date/Time:

17/4/18

Sent By:

AW

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

P/P

S\$

9,694.53

(5

days) Reduction:

19

%

Email

Call

FINAL SETTLEMENT

Date/Time:

08/08/18

Confirm with

WILLIAM

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

27

If NO or B 28, Ass. Lia:

Repair Cost:

(w/acc)

S\$

10,573.20

Loss of Rental (LOR):

S\$

622.50

(5.5

days) x \$115.00

Loss of Use (LOU):

S\$

273.00

50

x 5.5

Loss of Income (LOI):

S\$

-

(\$

x

days)

LOR only

☐

LOU only

☐

LOR + LOU

☐

LOR + LOI

☒

(Tick only one)

GIA/LTA Search

S\$

7.49

Medical:

S\$

-

Disbursement:

S\$

-

Legal Cost

S\$

-

Total:

S\$

11,288.19

Global Sum S\$:

11,280.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

11,280.00

Name 1:

COMFORTABLE PRO ENGINEERING 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:

\$400.00