

15/5/2010

INS. CASE OWNER:

Lynn

CO 4/ASM 1800

8833

M/pa3

LKK

EAC:

44756

Surveyor:

MAEF

DOI:

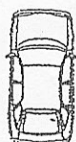
14/5/2018

Date / Time:

11.5.18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SLV 434Z

Name of Insured:

ASIA Umo plc

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A:

7/8/18

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Han Ngaiap Kwang

Driver Tel No.:

(V/L: YES / NO)

Claim No.:

Sgmo0619

Policy No.:

Make / Model:

Place of Accident:

Upper I'gon Rd before Junction.

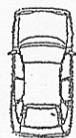
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SLT 3580 A



INSRS:

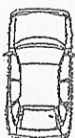
WSP:

Tel:

Liability:

RMKS:

SK Auto.



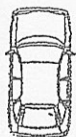
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

1/6

1/6

1/6

1/6/18

✓ OI GIA.

1/6/18

EC instruction: DS ✓. Pls verify with surveyor that all 4 reverse sensor is damaged due to the accident & it is necessary to replace the whole bumper.

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\$ 4000.00

(5 days) Reduction: 70 %

Email

Call

FINAL SETTLEMENT

Date/Time: 10/9/2020

Confirm with Tyson

Email

Call

Final Liability:

% 100

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

If NO or B 28, Ass. Lia:

Repair Cost: 4280.00

Loss of Rental (LOR):

S\$

(days)

Loss of Use (LOU):

S\$ 30.00 (\$ 50 x 6

days)

Loss of Income (LOI):

S\$

(\$ x

days)

LOR only ☐ LOU only ☒LOR + LOU ☐LOR + LOI ☐

[Tick only one]

GIA/LTA Search

S\$ 2.00

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$ 350.00

Total:

S\$ 4582.00

Global Sum S\$: 4580.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$ 4580.00

Name 1:

SK Automobile Pte Ltd

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3: