

INS. CASE OWNER:

TE

CC 4 / ASM 1800

9843 / K1ha3

LKK:

IDAC:

48801

Surveyor:

Amk

DOI:

ASSIGNMENT

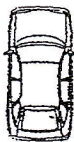
31/5/2018

Date / Time:

31/05/2018

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SKT 662H

Name of Insured:

Lm Chm Hm

Insured Tel No.:

HP: 96805319

Excess Sec II :SS

D.O.A:

28/05/2018

Claim No.:

Sfmomy

Policy No.:

6A048370

Make / Model:

7-Setima

Place of Accident:

Hardy Rd

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

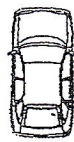
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SHD 3062K



INSRS:

WSP:

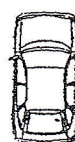
Tel:

Liability:

RMKS:

cbw

loyhs.



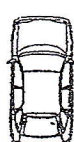
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

13/6/18

SHD 3062K - call in 1602314 / Alag 392; 08:26/10/18
SKT 662H x

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

26/06/18 - oic

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:

4/6

Sent By:

Amk

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

PIP

S\$ 2,480.76

(2 days)

Reduction:

44

%

Email

Call

FINAL SETTLEMENT

Date/Time:

20/06/18

Confirm with:

WILLIAM

Email

Call

Final Liability:

%

100

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

Nik

If NO or B 28, Ass. Lia:

Repair Cost:

(w/ass)

S\$ 2,654.41

COI U-TOKEN FROM UPT MOST

Loss of Rental (LOR):

S\$ 234.00

(2 days)

X \$ 117.00

Loss of Use (LOU):

S\$ 100.00

(\$ 50 x 2 days)

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\$ -

1) Claim status: Normal/Reject/Private Settle

Disbursement:

S\$ -

(e.g. Tow/ Independent)

2) Report Format:

Legal Cost

S\$ -

3) Survey fee:

\$350.00

Total:

S\$ 2,995.90

Global Sum S\$:

2,990.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$ 2,990.00

Name 1:

COMFORTDELGRO

ENGINEERING PTE LTD

Payee 2: (Strike if N.A.)

S\$ -

Name 2:

-

Payee 3: (Strike if N.A.)

S\$ -

Name 3:

-