

15/5/2010

INS. CASE OWNER:

Ernest

CC 4 Ashu AXA1801 0820 / 9/6/18

LKK:

IDAC:

ASSIGNMENT

Surveyor:

DOI:

Date / Time:

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

Name of Insured:

Insured Tel No.:

Excess Sec II : \$\$

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

Claim No.:

Policy No.:

Make / Model:

Place of Accident:

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

Insured Liability:

%

Final ? Yes / No

SEP 7711



INSRS:

WSP:

Tel:

Liability:

RMKS:

un insured



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

18/6/18

vic

SEP 7711 - MHA (INC 18007711) OUT 17/1/18
SEP 54627 - X

A smart claim.

19/6 - OI already scrap that vehicle. On October 2018
OI inform that survey told him that there is
#10K claim against him when he want to get
insurance for his new car. (Agent from M device)
- write to Ernest. OI dispute in PD damage cost.
if it really a 10K claim - send to OI.
19/6 - TP WLS cancel case no survey as TP scrap
vehicle already also. * NO SURVEY DONE *

19-06-18 TO CLOSE FILE. NO SURVEY DONE.

4

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:

\$

(

days) Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with

Email

Call

Final Liability:

%

100

(Agreed / Assessed) BOLA S/N No. : 22

Repair Cost:

\$

Loss of Rental (LOR):

\$

(

days)

Loss of Use (LOU):

\$

(\$

x

days)

Loss of Income (LOI):

\$

(\$

x

days)

LOR only

LOU only

LOR + LOU

LOR + LOU

[Tick only one]

GIA/LTA Search

\$

Medical:

\$

Disbursement:

\$

(e.g. Tow/ Independent)

Legal Cost

\$

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

Total:

\$

Global Sum \$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

\$

Name 1:

Payee 2: (Strike if N.A.)

\$

Name 2:

Payee 3: (Strike if N.A.)

\$

Name 3:

Cancelled case.