

15/5/2010

INS. CASE OWNER:

CC4 / LCR 180 4081

LKK:
IDAC:

Surveyor:

ABT

DOI:

ASSIGNMENT

26/11

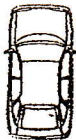
Date / Time :

14-6-18

Registered in Merimen:

19-6-18

Pre-assign / CCU / FTE



Insured Vehicle No. :

SLK 6952M

Name of Insured :

LEAF PL

Insured Tel No. :

HP:

Excess Sec II :SS

D.O.A : 13-6-18

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

MALAKRISHNA S/O S. THIRAPARAN

Driver Tel No. :

(V/L: YES / NO)

Claim No. :

Policy No. :

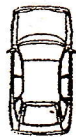
Make / Model :

Honda Vezel.

Place of Accident :

chang Airport 73 Basement
C/P.

SLT 6472 J



INSRS:

WSP:

Bodyfix

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

26/11
14/12/18

SLT 6472 J. X ;

SLK 6952M. CC4 / LCR 17 012734 / R1W6392; DIA: 23/11/18

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:

26/11/18 email.

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:

L19

S\$ 2,400.00

(3)

days)

Reduction:

75

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with

Email

Call

Final Liability:

%

50

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

If NO or B 28, Ass. Lia :

Repair Cost:

S\$

-

Loss of Rental (LOR):

S\$

-

(

days)

Loss of Use (LOU):

S\$

-

(\$

x

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\$

-

(e.g. Tow/ Independent)

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$ 320.00

Total:

S\$

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

-

Name 1:

-

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

-

Payee 3: (Strike if N.A.)

S\$

-

Name 3:

-