

15/5/2010

INS. CASE OWNER:

CC 4/1111801 1273, F 023/1

LKK:

IDAC:

Surveyor:

KSC

DOI:

ASSIGNMENT

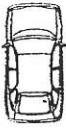
Date / Time:

21/6/18

Registered in Merimen:

21/6/18

Pre-assign / CCU / FTE



Insured Vehicle No.:

SH 90415

Name of Insured:

CTPV

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A:

16/6/18

Is driver the owner?

(YES ☒ NO ☐)

Nature of Accident:

If NO, Driver Name / Age:

TAN POH HUE

Driver Tel No.:

(V/L: YES / NO)

Claim No.:

MIT18060861

Policy No.:

MCOM0015

Make / Model:

Hyundai

Place of Accident:

UPP THINSON RD

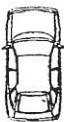
OI GIA REPORT: YES / NO: TP GIA REPORT: YES / NO

Insured Liability:

%

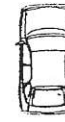
Final? Yes / No

SGF 9309V

INSRS:
WSP:
Tel:
Liability:
RMKS:

Soon

Seng

INSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:

Date/ Time	STAGE	DATE / PIC
21/6/18	Non-Reporting ltr (1st):	
21/6/18	Non-Reporting ltr (2nd):	
21/6/18	Non-Reporting ltr (Final):	
21/6/18	Notification ltr (if non-pickup):	
21/6/18	Call OI:	
21/6/18	After call ltr to OI:	
4-7-18	Documentation Check List:	
4-7-18	Notification ltr (if non-pickup)	
4-7-18	After call ltr to OI:	
4-7-18	Authorisation To Act:	
4-7-18	Release Voucher:	
4-7-18	Final Repair Bill:	
4-7-18	Car Rental Invoice:	
4-7-18	Towing Invoice	
4-7-18	LTA / GIA:	
4-7-18	Medical Bill:	
4-7-18	PIR:	
4-7-18	Mandate/Reject Instruction:	
4-7-18	LOD	
4-7-18	Payment Breakdown Form:	
4-7-18	Post-Repair Photos:	
4-7-18	Others:	
4-7-18	PRELIMINARY ADVICE	
4-7-18	FINALIZATION	
4-7-18	FINAL SETTLEMENT	
4-7-18	Final Liability:	
4-7-18	Repair Cost:	
4-7-18	Loss of Rental (LOR):	
4-7-18	Loss of Use (LOU):	
4-7-18	Loss of Income (LOI):	
4-7-18	LOR only ☒ LOU only ☐	
4-7-18	GIA/LTA Search	
4-7-18	Medical:	
4-7-18	Disbursement:	
4-7-18	Legal Cost	
4-7-18	Total:	
4-7-18	FINAL PAYMENT	
4-7-18	Payee 1:	
4-7-18	Payee 2: (Strike if N.A.)	
4-7-18	Payee 3: (Strike if N.A.)	

RECEIVED 10 SEP 2018

INFORM ILL DID REPORTED TP VEH NO INCORRECTLY.

Confirm by: KSC

Email ☒ Call ☐Email ☒ Call ☐Email ☒ Call ☐Email ☒ Call ☐Email ☒ Call ☐Email ☒ Call ☐Email ☒ Call ☐Email ☒ Call ☐Email ☒ Call ☐Email ☒ Call ☐Email ☒ Call ☐Email ☒ Call ☐Email ☒ Call ☐Email ☒ Call ☐Email ☒ Call ☐Email ☒ Call ☐Email ☒ Call ☐COPY SENT
W/ 21/6/18

1) Claim status: Normal/Reject/Private Settle

2) Report Format: TP

3) Survey fee: \$500

Global Sum S\$:

Email ☐ Call ☐

Confirm with: JAMES

Name 1: SOON SENG COMPANY (SG) PTE LTD

Name 2:

Name 3: