

6/5/2010

INS. CASE OWNER:

Ming Yao

CC 3 / AIG 180

11275 / KPA3

LKK:

IDAC:

Surveyor:

KSC

DOI:

20-6-18

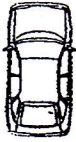
Date / Time:

20-6-18

Registered in Merimen:

21/6/18

Pre-assign / CCU / FTE



Insured Vehicle No.:

SLW 2489Y

Name of Insured:

KOH Yau Hwa Ann

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A.:

18-6-18

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Tan Lee Yew, 64yrs.

Driver Tel No.:

96609948

(V/L: YES / NO)

Claim No.:

G4278330065G

Policy No.:

1807008731

Make / Model:

Amm A3

Place of Accident:

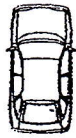
UTE

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

Insured Liability: %

Final ? Yes / No

SHD 22 X



INSRS:

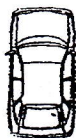
WSP:

Tel:

Liability:

RMKS:

Trans. Cab



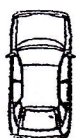
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

20/6
18/18SHD 22 X - 03/Asm 17014830/KPA3 : DOA: 11/11/17
- 03/AXA 17015821/KPA3 : DOA: 11/08/17
SLW 2489Y - X25/6/2018
3pm

Spoke to UID, confirmed accident statement, send letter to OI.

Bola 27 100%
- ~~FINANCIAL~~
- OI / UID finds
- ORIGINAL TP LOG IN.03/09/19
11/09/19- SEND 1st OFFER TO TP
- TP ACCEPTED OFFER.
- PV IN. ALL DOCS IN ORDER
- TO CLOSE.

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: 3/25/6/2018

Documentation Check List: Handler Typist

Notification ltr (if non-pickup)

After call ltr to OI: EMMI

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: P/P

S\$ 4,599.64 (2 days) Reduction: 88 %

Email ☐ Call ☐

FINAL SETTLEMENT

Date/Time: 10/09/19

Confirm with

WIA YIN

Email ☒ Call ☐

Final Liability:

% 100 (Agreed / Assessed) BOLA S/N No.: 27

If NO or B 28, Ass. Lia:

Repair Cost: (w/acc)

S\$ 4,921.62

LOD RMT - ENDED TP

Loss of Rental (LOR):

S\$ 599.20 (4 days) x 919.80

Loss of Use (LOU):

S\$ - (\$ x days)

Loss of Income (LOI):

S\$ 200.00 (\$50 x 4 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:

9310.00

Total:

S\$ 5,728.31

Global Sum S\$: 5,500.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☐ Call ☐

Payee 1:

S\$ 5,500.00

Name 1:

TRANS-CAB AUTO SERVICES PTE LTD

Payee 2: (Strike if N.A.)

S\$ -

Name 2:

-

Payee 3: (Strike if N.A.)

S\$ -

Name 3:

-