

15/5/2010

INS. CASE OWNER:

KC

CC

4 / Asm 180 11399 / R1 W3

LKK:

IDAC:

52958

ASSIGNMENT

Surveyor:

RASM

DOI:

25/6/18

Date / Time:

21/6/2018

Registered in Merimen:

Pre-assign / CCU / FTE

PA9666A



Insured Vehicle No.:

Name of Insured:

Supreme Coach Services

Insured Tel No.:

HP:

Excess Sec II :SS

1,500.00

D.O.A.:

19/6/18

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

KTH WBO Bole

(V/L: YES / NO)

Claim No.:

Policy No.:

Make / Model:

Place of Accident:

88mool 60

P54988

1670 LT43ep

Pochon Rd

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

Insured Liability: %

Final ? Yes / No

SLT366Y



INSRS:

WSP:

Tel:

Liability:

RMKS:

MAXIMUS

Racing



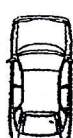
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/Time

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:

22/6/18 - VIC

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:

25/6

Sent By:

Jm

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

S\$

4,459.20

(3

days) Reduction:

43

%

Email

Call

FINAL SETTLEMENT

Date/Time:

10/12/18

Confirm with:

CAPHIVE

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

NIL

Repair Cost:

S\$

4,771.34

Loss of Rental (LOR):

S\$

400.00

(4

days) x

\$100.00

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\$

7.45

Medical:

S\$

-

Disbursement:

S\$

-

(e.g. Tow/ Independent)

Legal Cost

S\$

-

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$350.00

Total:

S\$

5,178.79

Global Sum S\$:

-

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

5,178.79

Name 1:

MAXIMUS

RACING

PTB LTD

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

-

Payee 3: (Strike if N.A.)

S\$

-

Name 3:

-