

Lundari

S3
004/111/80

11495

N eazg

Polycom

Naz

ASSIGNMENT

DOI:

26/6/18

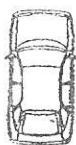
Date / Time:

25/6/18

Registered in Merimen:

27/7/18

Pre-assign / CCU / FTE



Insured Vehicle No. :

SHD 3793 J

Name of Insured :

CTPL

Insured Tel No. :

HP:

Excess Sec II : \$\$

D.O.A :

18/6/18

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

Ng Kian Kah

Driver Tel No. :

98336984

(V/L: YES / NO)

Claim No. :

MCT18060544

Policy No. :

MUM0015

Make / Model :

T. Prius

Place of Accident :

Mong West st 61

If NO, Driver Name / Age :

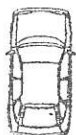
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability :

%

Final ? Yes / No

FBK 528 m



INSRS:

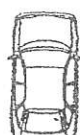
WSP:

Tel :

Liability :

RMKS:

Share Lead



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

10/7

Actu

FBK 528m - MCT18060544 / KLSB2: 26/4/18
 SHD 3793J - MCT18060544 / KLSB2: 26/4/18
 - CCU/111/700 23241 Dfa3: 26/4/18

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:

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:

5/7

Pending surveyor's assignment sheet.

12.7.18

SEEK MANDATE TO REQUEST FOR OLD VIDEO.

RECD OLD VIDEO SHOW TP OVERTAKE FROM THE RIGHT WHILE OLD
 MAKE A TURN, & TP TRAVEL ALONG CHEVRON.

8.8.18

SEEK APPROVAL TO REJECT TP CLAIM.

MANDATE APPROVE TO REJECT TP CLAIM.

EMAIL WSP TO REJECT TP CLAIM.

Reject Case

By (staff) : Shen

Approved by : J

Date : 30-08-18

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:

%

0

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

If NO or B 28, Ass. Lia :

Repair Cost:

\$\$

TP TRAVEL ON THE CHEVRON TO OVERTAKE OLD WHILE OLD MAKES TURN.

Loss of Rental (LOR):

\$\$

(days)

Loss of Use (LOU):

\$\$

(\$

x

days)

Loss of Income (LOI):

\$\$

(\$

x

days)

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

\$\$

Medical:

\$\$

Disbursement:

\$\$

(e.g. Tow/ Independent)

Legal Cost

\$\$

1) Claim status: Normal/Reject/Private Settle /wp/p

2) Report Format:

TP

3) Survey fee:

+ 80.

Total:

\$\$

Global Sum \$S:

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:

COPY SENT
21/8/18