

15/5/2010

INS. CASE OWNER:

LATHA

CC4/III 1801

2222

KHB3/4

LKK:
IDAC:

Surveyor:

Fenneth

DOI:

ASSIGNMENT

6/7/18

Date / Time:

6/7/18

Registered in Merimen:

6/7/18

Pre-assign / CCU / FTE



Insured Vehicle No.:

XE 1A86M

Claim No.:

M20182071

Name of Insured:

MATT WAT PETROLEUM HAMBURG PH

Policy No.:

M46775

Insured Tel No.:

HP:

Make / Model:

M4W

Excess Sec II :\$S

D.O.A.:

7/7/18

Place of Accident:

BT TIMAH KJ TO NODUMPS KJ

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age: MOND BASIR BILIN ABU BAKAR.

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

Driver Tel No.:

(V/L: YES / NO)

Insured Liability:

% Final ? Yes / No

SUK 39235



INSRS:

WSP:

Tel:

Liability:

RMKS:

OPTIMA



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

10/7/18
VIC

SUK 39235 X

XE 1A86M Y

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:

PRELIMINARY ADVICE

Date/Time:

Sent By:

10/07/18

- ALL BOGS IN ORDER TO CLOSE.

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

PLP

\$S

1,648.68

(4 days)

Reduction:

56

%

Email

Call

FINAL SETTLEMENT

Date/Time:

04/09/18

Confirm with:

OPTIMA

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

NIL

If NO or B 28, Ass. Lia:

Repair Cost:

(w/levy)

\$S

1,764.09

(LOW CHARGED CASE)

Loss of Rental (LOR (w/levy))

\$S

642.00

(6 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 + LO

[Tick only one]

GIA/LTA Search

\$S

2.00

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

2,408.09

Global Sum \$S:

-

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

\$S

2,408.09

Name 1:

OPTIMA

WERKE FTS LTD

Payee 2: (Strike if N.A.)

\$S

-

Name 2:

-

Payee 3: (Strike if N.A.)

\$S

-

Name 3:

-