

15/5/2010

INS. CASE OWNER:

CC 4/EQI1801

3081

LKK:

IDAC:

Surveyor:

KENNETH

DOI:

ASSIGNMENT

20/08/18

Date / Time :

18/8/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

SLB 82587

Name of Insured :

FENG WONG

Insured Tel No. :

HP:

8518 5718

Excess Sec II : \$\$

D.O.A. :

11/3/18

Is driver the owner?

(YES / NO)

Nature of Accident :

Claim No. :

Policy No. :

PMPM 05-004278

Make / Model :

BMW

Place of Accident :

WOODLAND COUNTRY

If NO, Driver Name / Age :

Driver Tel No. :

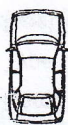
(V/L: YES / NO)

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

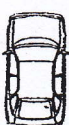
Insured Liability :

% Final ? Yes / No

SDX 61737

INSRS:
WSP:
Tel :
Liability :
RMKS:

Lai Huat

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

Date / Time	STAGE	DATE / PIC
18/8/18	Non-Reporting ltr (1st):	
	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
	Call OI:	21/08/18 - JIC
	After call ltr to OI:	21/08/18 - JIC
	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: 29/08/2018 Sent By: LB		
FINALIZATION Date/Time: Confirm with: Confirm by:		
Repair Cost: P18	SS 644.25 (2 days) Reduction: 23 %	Email ☐ Call ☐
FINAL SETTLEMENT Date/Time: 20/08/2018 Confirm with: SENNY Email ☒ Call ☐		
Final Liability:	% 80 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: (w/amt)	SS 689.25 - 4581.18	
Loss of Rental (LOR):	SS 400.00 (4 days) X \$100 - \$320.00	
Loss of Use (LOU):	SS - (\$ x days)	
Loss of Income (LOI):	SS - (\$ x days)	
LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LO ☐ [Tick only one]		
GIA/LTA Search	SS 2.00 - 2.00	
Medical:	SS -	
Disbursement:	SS - (e.g. Tow/ Independent)	
Legal Cost	SS -	
Total:	SS 1,091.35 Global Sum SS: 870.00	
FINAL PAYMENT Date/Time: Confirm with: Email ☐ Call ☐		
Payee 1:	SS 870.00 Name 1: LAI HUAT (HENG KEE) MOTOR PTE LTD	
Payee 2: (Strike if N.A.)	SS - Name 2: -	
Payee 3: (Strike if N.A.)	SS - Name 3: -	