

INS. CASE OWNER:

Jno 1am | CC 4, ASM 180 14204, Nua3

LKK:

IDAC:

Surveyor:

Ma2

DOI:

ASSIGNMENT

3/8/2018

Date / Time:

3/8/2018

Registered in Merimen:

Pre-assign / CCU / FTE

PC330S

"VIRTUAL"

58m00QV6



Insured Vehicle No. :

Claim No. :

Name of Insured :

Policy No. :

Insured Tel No. :

HP:

Make / Model :

Excess Sec II :SS

D.O.A : 1/8/2018

Place of Accident :

Is driver the owner? (YES / NO)

Nature of Accident :

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

561034J



INSRS:

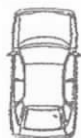
WSP:

Tel :

Liability :

RMKS:

Smr1.



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

561034J - X

PC330S - 03/11/2018/10022/11/2018 : 25/05/11

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:

FINALIZATION

Date/Time:

Confirm with:

Confirm by: NAZ

Repair Cost: P/P S\$ 2,399.65 (0.5 days) Reduction: 10 %

Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 20.10.20 Confirm with JIMMY

Email ☐ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : NIL

If NO or B 28, Ass. Lia :

Repair Cost: S\$ 2,399.65

OID ENCROACHED TP WHILE NEGOTIATING BEND

Loss of Rental (LOR): S\$ - (days)

Loss of Use (LOU): S\$ 125.00 (\$ 250 x 0.5 days)

Loss of Income (LOI): S\$ - (\$ x days)

LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]

GIA/LTA Search S\$ 7.00

Medical: S\$ -

Disbursement: S\$ - (e.g. Tow/ Independent)

Legal Cost S\$ -

1) Claim status: Normal/ ~~Project/ Private Sett~~

2) Report Format: TP

3) Survey fee: \$350

Total: S\$ 2,531.65

Global Sum S\$:

FINAL PAYMENT Date/Time: 20.10.20

Confirm with: JIMMY

Email ☐ Call ☐

Payee 1: S\$ 2,531.65

Name 1: SMRT BUSES LTD

Payee 2: (Strike if N.A.) S\$

Name 2:

Payee 3: (Strike if N.A.) S\$

Name 3: