

15/5/2010

INS. CASE OWNER:

TSS CHAS WAH CC 7/18/1801 4/27/18, N/A/18

LKK:

IDAC:

Surveyor:

NAT

DOI:

ASSIGNMENT

10/8/18

Date / Time:

10/8/18

Registered in Merimen:

4/8/18

Pre-assign / CCU / FTE



Insured Vehicle No.:

SVR 9616C

Claim No.:

68488675566

Name of Insured:

WR

Policy No.:

Insured Tel No.:

HP:

Make / Model:

Excess Sec II :S\$

D.O.A.:

7/8/18

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

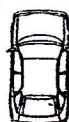
Insured Liability: %

Final ? Yes / No

SG 5651L

INSRS:
WSP:
Tel:
Liability:
RMKS:

SMKT.

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

Date/ Time		STAGE	DATE / PIC
2/8/18	SG 5651L-7	Non-Reporting ltr (1st):	
	SVR 9616C-4	Non-Reporting ltr (2nd):	
	WR non reporting.	Non-Reporting ltr (Final):	
	MINOR	Notification ltr (if non-pickup):	
	TP LOB IN BY EMAIL	Call OI:	204 14-9-18
		After call ltr to OI:	
		Documentation Check List: Handler	Typist
		Notification ltr (if non-pickup)	☐
		After call ltr to OI: EMAIL	☒
		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:
Repair Cost:	P/P	S\$ 1,768.00	(2 days) Reduction: 27 %
FINAL SETTLEMENT		Date/Time: 30/09/18	Confirm with: PATRICK
Final Liability:	%	100	(Agreed / Assessed) BOLA S/N No.: 15
Repair Cost:	S\$	1,768.00	
Loss of Rental (LOR):	S\$	-	(days)
Loss of Use (LOU):	S\$	700.00	(\$ 650 x 2 days)
Loss of Income (LOI):	S\$	-	(\$ x days)
LOR only ☐ LOU only ☒	LOR + LOU ☐ LOR + LO ☐ [Tick only one]		
GIA/LTA Search	S\$	7.00	
Medical:	S\$	-	
Disbursement:	S\$	-	(e.g. Tow/ Independent)
Legal Cost	S\$	-	
Total:	S\$	2,475.00	Global Sum S\$: -
FINAL PAYMENT		Date/Time:	Confirm with:
Payee 1:	S\$	2,475.00	Name 1: SMKT BUSBO LTD
Payee 2: (Strike if N.A.)	S\$	-	Name 2: -
Payee 3: (Strike if N.A.)	S\$	-	Name 3: -