

15/5/2010

INS. CASE OWNER:

LAUTHA

CC 3 / III 1801

4945,

U1639

LKK:

IDAC:

Surveyor:

MARCOUS

DOI:

ASSIGNMENT

23/08/18

Date / Time:

16/8/18

Registered in Merimen:

16/8/18

Pre-assign / CCU / FTE



Insured Vehicle No. :

SLU 4693X

Claim No. :

MCA18079

Name of Insured :

LUMFOKIDELUKI KONG & CAR WU

Policy No. :

M46080Y

Insured Tel No. :

HP:

Make / Model :

RENNET

Excess Sec II :S\$

D.O.A :

13/8/18

Place of Accident :

UPP SEEMUDON KO

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

400 EMI KNOWN

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

Driver Tel No. :

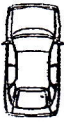
(V/L: YES / NO)

Insured Liability :

%

Final ? Yes / No

SLC98157

INSRS:
WSP:
Tel :
Liability :
RMKS:CHC
FulcoINSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date / Time	STAGE	DATE / PIC
11/8/18	Non-Reporting ltr (1st):	
	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
	Call OI:	
	After call ltr to OI:	
20/08/18	Documentation Check List: Handler	Typist
23/08/18	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:	
19/12/18	PRELIMINARY ADVICE	
	FINALIZATION	
	FINAL SETTLEMENT	
	Payee 1:	
	Payee 2: (Strike if N.A.)	
	Payee 3: (Strike if N.A.)	