

15/5/2010

INS CASE OWNER:

CC 4, ALG 180 15231, Kha3

LK:

IDAC:

Surveyor:

Kenneth

DOI:

ASSIGNMENT

21/8/2018

Date / Time:

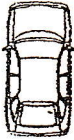
21/8/18

Registered in Merimen:

21/8/18

Pre-assign / CCU / FTE

SKT 1272P



Insured Vehicle No.:

Claim No.:

Name of Insured:

Van Mei Liang

Policy No.:

180050616

Insured Tel No.:

HP:

97732575

Make / Model:

MSAN 6AHTA1

Excess Sec II :SS

D.O.A:

14/8/2018

Place of Accident:

Dunearn Rd

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

STJ 2812L



INSRS:

WSP:

Tel:

Liability:

RMKS:

Chawhoo



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

28/8

nu

STJ 2812L - X; SKT 1272P - X

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:

12/09/18 - OK

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:

12/09/18 @ 11:40am

@ 11:54am

26/09/18

12/10/18

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

P/P

S\$

1,043.60

(3 days)

Reduction:

32 %

Email

Call

FINAL SETTLEMENT

Date/Time:

12/06/19

Confirm with

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

28

If NO or B 28, Ass. Lia:

0%

Repair Cost:

(w/loss)

S\$

1,972.65

(3 veh. c.c.; 01 2nd car)

Loss of Rental (LOR):

S\$

1,155.60

(6 days)

x \$180

Loss of Use (LOU):

S\$

-

(\$ x days)

Loss of Income (LOI):

S\$

-

(\$ x days)

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

S\$

200

Medical:

S\$

-

1) Claim status: Normal/Reject/Private Settle

Disbursement:

S\$

-

(e.g. Tow/ Independent)

2) Report Format:

Legal Cost

S\$

-

3) Survey fee:

\$320.00

Total:

S\$

3,130.25

Global Sum S\$:

3,000.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

3,000.00

Name 1:

CHAW GOON MOTOR

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

Payee 3: (Strike if N.A.)

S\$

-

Name 3: