

5/5/2010

INS. CASE OWNER:

CC 4 / AG 180

15645, K W3

LKK:

IDAC:

Surveyor:

Kenneth

DOI:

28/8/18

Date / Time:

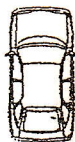
27/8/2018

Registered in Merimen:

28/8/2018

Pre-assign / CCU / FTE

SGP 7338M



Insured Vehicle No.:

Name of Insured:

HAN JIAT HOON

Insured Tel No.:

HP:

Excess Sec II : \$S

D.O.A.:

25/8/2018

Claim No.:

Policy No.:

Make / Model:

Place of Accident:

2100191924

M-BENZ E350

LORNE RD

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

ONG 24 XUAN, THADUS

Driver Tel No.:

9755 729 (V/L: YES / NO)

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

Insured Liability:

%

Final ? Yes / No

SVJ 2514L



INSRS:

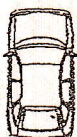
WSP:

Tel:

Liability:

RMKS:

Complete my



INSRS:

WSP:

Tel:

Liability:

RMKS:



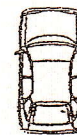
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time		STAGE	DATE / PIC
7/8/18	SVJ 2514L - X, SGP 7338M - X	Non-Reporting ltr (1st):	
		Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
08/10/18 @ 8:32 PM	INTERVIEW DOWN - spoke to OI. OI was his friend. He confirmed no petrol involved. OI is a family friend. He also confirmed accident details & was making a return within accident history. Informed TP claim & liability, agreed to offer & aware not insured.	Notification ltr (if non-pickup):	
		Call OI:	08/10/18 - VC
		After call ltr to OI:	08/10/18 - VC
08/10/18	- send letter to OI. - FINISHED - TP LOP IN BY EMAIL	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:	☒
04/10/19	- send 1st offer to TP. - TP accepted offer. - all docs in order to close.	LTA / GIA:	☒
		Medical Bill:	☒
		PIR:	☒
		Mandate/Reject Instruction:	☒
		LOD	☒
		Payment Breakdown Form:	☒

PRELIMINARY ADVICE	Date/Time:	Sent By:	Post-Repair Photos:	☐
			Others:	☐

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: L19	\$S 6,000.00 (11 days)	Reduction: 56 %	Email ☐ Call ☐

FINAL SETTLEMENT	Date/Time: 04/10/19	Confirm with: LUY	Email ☒ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No.:	1a

Repair Cost: 6,420.00	\$S 6,420.00		If NO or B 28, Ass. Lia:
Loss of Rental (LOR):	\$S 1,200.00 (12 days) x \$100.00		600 waiting return

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 36.50		

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 7,656.50	Global Sum \$S:	7,600.00

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	\$S 7,600.00	Name 1:	COMPLETE VMS PFS LTD

Payee 2: (Strike if N.A.)	\$S -	Name 2:	-
Payee 3: (Strike if N.A.)	\$S -	Name 3:	-