

15/5/2010

INS. CASE OWNER:

MBA

CC 4/111 180

17/9/18, Dha39

LKK:

IDAC:

Surveyor:

ABT

DOI:

ASSIGNMENT

20/9/2018

Date / Time:

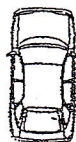
20/9/2018

Registered in Merimen:

20/9/2018

Pre-assign / CCU / FTE

SHA 18815



Insured Vehicle No.:

C7P2

Name of Insured:

C7P2

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A:

19/9/2018

Claim No.:

MCT18090511

Policy No.:

MCOM901

Make / Model:

1- Pmus

Place of Accident:

Seah St.

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Dny Pde Coon
4134473

Driver Tel No.:

(V/L: YES / NO)

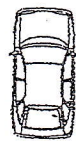
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SH 850bm



INSRS:

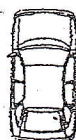
WSP:

Tel:

Liability:

RMKS:

CHMM



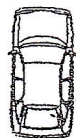
INSRS:

WSP:

Tel:

Liability:

RMKS:



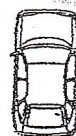
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

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:

20/10/18

OKIG - DOCE IN. AL IN ORPTE.

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

Lis

S\$ 10,400.00

(10 days)

Reduction:

39

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with:

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

9

Repair Cost:

(20/10/18)

S\$ 11,128.00

Loss of Rental (LOR):

S\$ 1,550.64

(13 days)

x \$ 119.28

Loss of Use (LOU):

S\$ 520.00

x 13 days

Loss of Income (LOI):

S\$ -

(\$ x 13 days)

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

S\$ -

Medical:

S\$ -

Disbursement:

S\$ -

Legal Cost

S\$ -

Total:

S\$ 13,198.64

Global Sum S\$:

-

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$ 13,198.64

Name 1:

CHUNNI MOTOR WORK PTE LTD

Payee 2: (Strike if N.A.)

S\$ -

Name 2:

-

Payee 3: (Strike if N.A.)

S\$ -

Name 3:

-

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$600.00