

INS. CASE OWNER:

JMMY 400

CC 3 / MG 180

17/9/18, N2A3

LKK:

IDAC:

Surveyor:

N2

DOI:

ASSIGNMENT

14/9/18

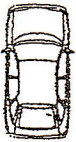
Date / Time:

14/9/18

Registered in Merimen:

20/9/18

Pre-assign / CCU / FTE



Insured Vehicle No.:

SJU 8742K

Claim No.:

G2040089530G

Name of Insured:

Leo Chew Teck Augustine

Policy No.:

N00 24279

Insured Tel No.:

HP:

9011246

Make / Model:

V. Jetta

Excess Sec II :\$S

D.O.A.:

12/9/18

Place of Accident:

c/p of Tessa's comp.

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

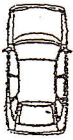
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

17/9/18



INSRS:

WSP:

Tel:

Liability:

RMKS:

Smr7.m



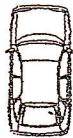
INSRS:

WSP:

Tel:

Liability:

RMKS:



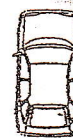
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

26/9
7THGAB1018m - C3/MG 180 (3385) Vno: 92; DOA: 12/9/18
- N2/mer 600 39181 K1VBC2; DOA: 22/9/18

SJU 8742K - X

FINACED.

04/12/18 @
2:12PMCALL OI. OVERLOOKS TONG. MIE REVIEWED.
OI REPORTED HE CROSSED THE JUNCTION
W/ STOP LINE (CAR PARK). SEND LETTER
4 MAIL TO OI TO NOTIFY TP CLAIM &
NCD RATED.05/12/18 @
10:14PMOI CALLS IN. CONFIRMS ACCIDENT
DETAILS. AGREED TO GETTER 4 MAIL
NCD RATED.21/05/19
22/05/19- TP LOD IN BY MAIL
- SEND 1ST OFFER TO TP
- TP ACCEPTED OFFER.
- ALL BOOKS IN ORDER.
- TO CLOSE.

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:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost: L16

\$S 2,050.00

(4 days)

Reduction: 59

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with:

Email

Call

Final Liability:

%

100

(Agreed / Assessed) BOLA S/N No.:

NIL

If NO or B 28, Ass. Lia:

Repair Cost:

\$S 2,050.00

Loss of Rental (LOR):

\$S 667.68

(6 days)

x \$111.28

Loss of Use (LOU):

\$S 360.00

(\$ 60 x 6 days)

Loss of Income (LOI):

\$S -

(\$ x days)

LOR only ☐ LOU only ☐LOR + LOU ☐LOR + LOI ☒

[Tick only one]

GIA/LTA Search

\$S

7.00

Medical:

\$S

-

Disbursement:

\$S

-

Legal Cost

\$S

-

(e.g. Tow/ Independent)

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$350.00

Total:

\$S 3,081.68

Global Sum \$S:

3,080.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

\$S 3,080.00

Name 1:

SHRT TAXIS PTE LTD

Payee 2: (Strike if N.A.)

\$S

-

Name 2:

-

Payee 3: (Strike if N.A.)

\$S

-

Name 3:

-