

15/5/2010

INS. CASE OWNER:

SUNDARI

CC 4/III1801

25/6, N Wob 9

LKK:

IDAC:

Surveyor:

NAZ

DOI:

ASSIGNMENT
02/10/18

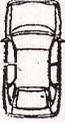
Date / Time :

26/1/18

Registered in Merimen:

26/1/18

Pre-assign / CCU / FTE



Insured Vehicle No. :

SKD 4472B

Claim No. :

MCT18090608

Name of Insured :

TPV

Policy No. :

MUM0010

Insured Tel No. :

HP:

Make / Model :

TOYOTA

Excess Sec II :SS

D.O.A. :

2/1/18

Place of Accident :

KLANG BUSINESS PARK

Is driver the owner?

(YES / NO)

Nature of Accident :

LOW TARI 1

If NO, Driver Name / Age :

PAVI MANAPRAM SLOV RAJAKOPAL

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

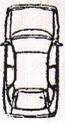
Driver Tel No. :

(V/L: YES / NO)

Insured Liability :

% Final ? Yes / No

PL16NH



INSRS:

WSP:

Tel :

Liability :

RMKS:

CROWN
ASIA



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time		STAGE	DATE / PIC
26/1/18	PL16NH-X	Non-Reporting ltr (1st):	
		Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	
02/10/18	MILE EQUIPMENT. OLD HIT PARKED TP. OBTAIN CREDIT MANDATE. IN KLANG PJ	After call ltr to OI:	
		Documentation Check List: Handler	Typist
		Notification ltr (if non-pickup)	<input type="checkbox"/>
		After call ltr to OI:	<input type="checkbox"/>
15/10/18	EMAIL CREDIT CLEAR. FINISHED TP LOG IN BY EMAIL	Authorisation To Act:	<input checked="" type="checkbox"/>
		Release Voucher:	<input checked="" type="checkbox"/>
		Final Repair Bill:	<input checked="" type="checkbox"/>
		Car Rental Invoice:	<input type="checkbox"/>
16/10/18	TP REPORT FOR MANDATE APPROVAL REPORT DONE	Towing Invoice	<input type="checkbox"/>
		LTA / GIA :	<input type="checkbox"/>
29/10/18	OBTAIN MANDATE APPROVAL TO U BY MANDATE	Medical Bill:	<input type="checkbox"/>
20/11/18	U APPROVED MANDATE	PIR:	<input type="checkbox"/>
27/12/18	SEND 1ST OFFER TO TP.	Mandate/Reject Instruction:	<input checked="" type="checkbox"/>
07/01/19	RECEIVED PV. TP ACCEPTED OFFER. ALL BOCS IN OFFER. TO CLOSE.	LOD	<input checked="" type="checkbox"/>
		Payment Breakdown Form:	<input type="checkbox"/>
PRELIMINARY ADVICE	Date/Time: Sent By:	Post-Repair Photos:	<input type="checkbox"/>
		Others:	<input type="checkbox"/>

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: L19 S\$ 4,350.00 (3 days) Reduction: 66 % Email Call

FINAL SETTLEMENT Date/Time: 02/10/18 Confirm with: JAYDEN Email Call

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : NIL

Repair Cost: (w/gst) S\$ 4,657.50

Loss of Rental (LOR): S\$ - (days) If NO or B 28, Ass. Lia : (LOW RATE ENDED BY COMPANY TP)

Loss of Use (LOU): S\$ 750.00 x 3 days

Loss of Income (LOI): S\$ - (S x days)

LOR only LOU only LOR + LOU LOR + LO [Tick only one]

GIA/LTA Search S\$ 7.45

Medical: S\$ -

Disbursement: S\$ - (e.g. Tow/ Independent)

Legal Cost S\$ -

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee: \$500.00

Total: S\$ 5,411.95 Global Sum S\$: -

FINAL PAYMENT Date/Time: Confirm with: Email Call

Payee 1: S\$ 5,411.95 Name 1: CROWN ASIA BUS BUILDER PTE LTD

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

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