

15/5/2010

INS. CASE OWNER:

FOO QHT VAN
Rasid

CC 3AIG1801

9275, R18639

LKK:
IDAC:

Surveyor:

Rasul

DOI:

ASSIGNMENT

31/10/2018

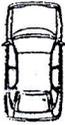
Date / Time:

24/10/18

Registered in Merimen:

24/10/18

Pre-assign / CCU / FTE



Insured Vehicle No. :

SMC 770C

Claim No. :

69107117554

Name of Insured :

LIAN MEE FUN

Policy No. :

1800087603

Insured Tel No. :

HP:

9647718

Make / Model :

MERCEDES

Excess Sec II :SS

D.O.A.:

24/10/18

Place of Accident :

COMMONWEALTH AVE

Is driver the owner? (YES / NO)

(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

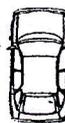
Insured Liability : % Final ? Yes / No

SMC 770C

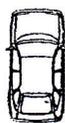


INSRS:
WSP:
Tel:
Liability:
RMKS:

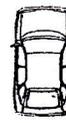
VOLKSWAGEN



INSRS:
WSP:
Tel:
Liability:
RMKS:



INSRS:
WSP:
Tel:
Liability:
RMKS:



INSRS:
WSP:
Tel:
Liability:
RMKS:

Date / Time

20/10/18
pikah in.

SMC 770C - X

SMC 770C - X

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI: 30/10/18

After call ltr to OI: 24/10/18

Documentation Check List: Handler Typist

30/10/2018
3.25 pm

Spoke to OI (Ms Chan), confirm accident statement, BOLA IS informed TP claim and HCD issue. OI agree to settle and aware HCD will be Attached. Send letter to OI.
e-mail liability clear
file pass to type mandate report

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:

18/10/19

- AIG APPROVED MANDATE.
- SEND ACCEPTANCE EMAIL TO TP
- ALL DOC IN ORDER
- TO CLOSE

PRELIMINARY ADVICE

Date/Time:

11/11/2018

Sent By:

LSP

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost: P/P

\$\$\$ 16,695.90

(12 days) Reduction: 10 %

Email Call

FINAL SETTLEMENT

Date/Time:

11/10/19

Confirm with

MEY

Email Call

Final Liability:

%

100

(Agreed / Assessed) BOLA S/N No. : 15

If NO or B 28, Ass. Lia :

Repair Cost: (w/LOU)

\$\$\$ 17,864.61

change tone

Loss of Rental (LOR (w/LOU))

\$\$\$ 1,198.40

(14 days) x \$ 80.00

Loss of Use (LOU):

\$\$\$ -

(\$ x days)

Loss of Income (LOI):

\$\$\$ -

(\$ x days)

LOR only LOU only

LOR + LOU

LOR + LO

[Tick only one]

GIA/LTA Search

\$\$\$

2.00

Medical:

\$\$\$ -

1) Claim status: Normal/Reject/Private Settle

Disbursement:

\$\$\$ -

(e.g. Tow/Independent)

2) Report Format:

Legal Cost

\$\$\$ -

3) Survey fee:

Total:

\$\$\$ 19,065.01

Global Sum \$\$\$: -

FINAL PAYMENT

Date/Time:

Confirm with:

Email Call

Payee 1:

\$\$\$ 17,866.61

Name 1:

VOLKSWAGEN CENTRE SINGAPORE

Payee 2: (Strike if N.A.)

\$\$\$ 1,198.40

Name 2:

BKW RENT A CAR PTE LTD

Payee 3: (Strike if N.A.)

\$\$\$ -

Name 3: