

INS. CASE OWNER

CC

6, CH 182 19494 Aka3

LKK:

IDAC:

Surveyor:

UMP

DOI:

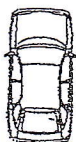
23-10-18

Date/Time:

23/10/2018

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SJA 8297.

Name of Insured:

My Chin Chong.

Insured Tel No.:

HP:

90048899

Excess Sec II :S\$

D.O.A.:

M10/18

Is driver the owner?

(YES / NO)

Nature of Accident:

Claim No.:

SNM1800502302

Policy No.:

Make / Model:

Place of Accident:

If NO, Driver Name / Age:

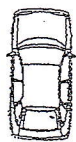
Driver Tel No.:

(V/L: YES/NO)

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

Insured Liability: % Final? Yes / No

SME 8726 G



INSRS:

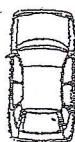
WSP:

Tel:

Liability:

RMKS:

My Solution



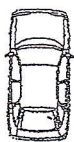
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/Time

23/11
VCSME 8726 G } call ASM 80 9342 ch3 : 22/10/18
SJA 8297

* Claiming cash others.

- FINALIZED

- TP VIDEO FOOTAGE IN. V / VIC / SME 8726 G

- ORIGINATED TP LOD IN BY BURL

- PLS FOLLOWED. OI MOVING OFF FROM
STATIONARY. TP TURNING OUT FROM
MINOR ROAD. SEND LETTER TO OI
TO NOTIFY TP CLAIM IN NOT ISSUED.

- FORWARDED VIDEO TO OI.

- SEND SET OFFER TO TP

- TP ACCEPTED OFFER.

- ALL DOCS 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: 12/04/19 - VC

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:

02/11/18

Sent By:

AS

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

L10

S\$

1,800.00

(A

days) Reduction:

46

%

Email

Call

FINAL SETTLEMENT

Date/Time:

22/04/19

Confirm with

SHARON

Email

Call

Final Liability:

%

50

(Agreed / Assessed)

BOLA S/N No.:

NIL

If NO or B 28, Ass. Lia:

Repair Cost:

\$1,926.00

S\$

960.00

Loss of Rental (LOR):

S\$

-

(

days)

Loss of Use (LOU):

S\$

210.00

(\$ 60 x 7 days)

Loss of Income (LOI):

S\$

-

(\$ x days)

LOR only

LOU only

LOR + LOU

LOR + LOI

[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:

\$100.00

Total:

S\$

1,180.45

Global Sum S\$:

1,800.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

1,800.00

Name 1:

MG SOLUTION PTE LTD

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

Payee 3: (Strike if N.A.)

S\$

-

Name 3: