

15/5/2010

INS. CASE OWNER:

Kian Meng

CC /AIG1802

h / K #63

LKK:

IDAC:

Surveyor:

KSC

DOI:

ASSIGNMENT

26/11/2018

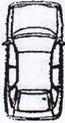
Date / Time:

8/11/18

Registered in Merimen:

8/11/18

Pre-assign / CCU / FTE



Insured Vehicle No. :

SMD 38636

Claim No. :

876 240 156

Name of Insured :

MAR JAN SIMPT sto sava smalt

Policy No. :

1800099188

Insured Tel No. :

HP: 97727061

Make / Model :

NISSAN

Excess Sec II :SS

D.O.A :

16/10/18

Place of Accident :

40M BAK PSE

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

5am 501am

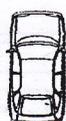


INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:

cheng hoe



INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:



INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:



INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:

Date / Time	STAGE	DATE / PIC
12/11/18	Non-Reporting ltr (1st):	
12/11/18	Non-Reporting ltr (2nd):	
12/11/18	Non-Reporting ltr (Final):	
12/11/18	Notification ltr (if non-pickup):	
13/11/2018	Call OI:	13/11/2018
13/11/2018	After call ltr to OI:	14/11/2018
13/11/2018	Documentation Check List:	Handler Typist
13/11/2018	Notification ltr (if non-pickup)	<input type="checkbox"/> <input type="checkbox"/>
13/11/2018	After call ltr to OI:	<input checked="" type="checkbox"/> <input type="checkbox"/>
13/11/2018	Authorisation To Act:	<input checked="" type="checkbox"/> <input type="checkbox"/>
13/11/2018	Release Voucher:	<input checked="" type="checkbox"/> <input type="checkbox"/>
13/11/2018	Final Repair Bill:	<input checked="" type="checkbox"/> <input type="checkbox"/>
13/11/2018	Car Rental Invoice:	<input checked="" type="checkbox"/> <input type="checkbox"/>
13/11/2018	Towing Invoice	<input type="checkbox"/> <input type="checkbox"/>
13/11/2018	LTA / GIA :	<input type="checkbox"/> <input type="checkbox"/>
13/11/2018	Medical Bill:	<input type="checkbox"/> <input type="checkbox"/>
13/11/2018	PIR:	<input type="checkbox"/> <input type="checkbox"/>
13/11/2018	Mandate/Reject Instruction:	<input type="checkbox"/> <input type="checkbox"/>
13/11/2018	LOD	<input checked="" type="checkbox"/> <input type="checkbox"/>
13/11/2018	Payment Breakdown Form:	<input type="checkbox"/> <input type="checkbox"/>
13/11/2018	Post-Repair Photos:	<input type="checkbox"/> <input type="checkbox"/>
13/11/2018	Others:	<input type="checkbox"/> <input type="checkbox"/>

PRELIMINARY ADVICE Date/Time: 28/11/2018 Sent By: LSP

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: 10 S\$ 2,830.00 ( 5 days) Reduction: 25 % Email  Call

FINAL SETTLEMENT Date/Time: 16/10/19 Confirm with: SUNE Email  Call

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 24 If NO or B 28, Ass. Lia :

Repair Cost: (w/ced) S\$ 3,019.50 OI come out from parking lot

Loss of Rental (LOR) (w/ced) S\$ 303.80 ( 4 days) \$85.00

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

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

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

GIA/LTA Search S\$ -

Medical: S\$ -

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

Legal Cost S\$ -

Total: S\$ 3,413.30 Global Sum S\$: -

FINAL PAYMENT Date/Time: Confirm with: Email  Call

Payee 1: S\$ 3,413.30 Name 1: CHENG HOE MOTOR PTE LTD