

PNC CASE OWNER:

AIDA

CC 3, 111 180

20824

Kha3

LKK:

EAC:

Surveyor:

Awk

DOI:

ASSIGNMENT

12/11/18

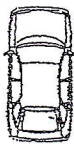
Date / Time:

12/11/18

Registered in Merimen:

13/11/18

Pre-assign / CCU / FTE



Insured Vehicle No.:

SHA 7231D

Claim No.:

HET 18110310

Name of Insured:

CTP1

Policy No.:

Insured Tel No.:

HP:

Make / Model:

Excess Sec II :S\$

D.O.A.:

11-11-18

Place of Accident:

AIRPORT BLVD

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

SHE 6856Y



INSRS:

WSP:

Tel:

Liability:

RMKS:

Pranner



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

20/11
Joy

SHE 6856Y - X; SHA 7231D - X

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:

27-11-18

FOR MANDATE

- MANDATE APPROVED
- SEND ACCEPTANCE FORM TO TP.
- ORIGINAL POCS IN.
- ALL IN ORDER.
- TO CLOSE.

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

46

S\$ 1,660.00

(2 days)

Reduction:

63

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with:

Email

Call

Final Liability:

100

(Agreed / Assessed)

BOLA S/N No.:

27

If NO or B 28, Ass. Lia:

Repair Cost:

G5T

S\$ 1,444.50

Loss of Rental (LOR):

S\$ 308.16

(3 days)

4/02.72

Loss of Use (LOU):

S\$ -

(\$ x days)

Loss of Income (LOI):

S\$ -

(\$ x days)

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

[Tick only one]

GIA/LTA Search

S\$ -

Medical:

S\$ -

Disbursement:

S\$ -

(e.g. Tow/ Independent)

Legal Cost

S\$ -

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$350.00

Total:

S\$ 1,752.66

Global Sum S\$: -

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$ 1,752.66

Name 1:

PREMIER AUTOMOTIVE SERVICES PTE LTD

Payee 2: (Strike if N.A.)

S\$ -

Name 2:

Payee 3: (Strike if N.A.)

S\$ -

Name 3: