

INS. CASE OWNER:

AIDA

CC 4/11 180

2873

Uha39

LKK:

IDAC:

Surveyor:

MAYUS

DOI:

ASSIGNMENT

3/12/18

Date / Time:

5/1/18

5/1/18

Registered in Merimen:

Pre-assign / CCU / FTE

SH 7341C

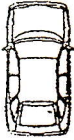
OTPL

MOT18120019

Mcom001

7. PMS

Buanglok Dr.



Insured Vehicle No. :

Claim No. :

Name of Insured :

Policy No. :

Insured Tel No. :

HP:

Make / Model :

Excess Sec II :SS

D.O.A.:

Place of Accident :

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

Chua Chuan Goo
9/12/1988

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

Driver Tel No. :

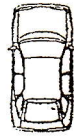
(V/L: YES / NO)

Insured Liability :

%

Final ? Yes / No

GEP 8872 S



INSRS:

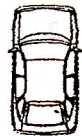
WSP:

Tel :

Liability :

RMKS:

Jin Auto.



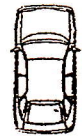
INSRS:

WSP:

Tel :

Liability :

RMKS:



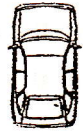
INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

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:

GEP 8872 S - 15/1/18 180 19016 / Aed3er : 00A 12/1/18
 SH 7341C - 15/1/18 180 19016 / Kua3 : 00A 12/1/18
 - 15/1/18 180 19016 / Kua3 : 00A 12/1/18

MANDATE APPROVED.
 TP ACCEPTED OFFER.
 ALL WORK IN ORDER.
 TO CLOSE.

29-1-19

LOO IN. FOR MANDATE
 AFTER REPAIR PHOTOS

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost: L19

S\$ 2,200.00

(4 days)

Reduction: 53

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with

Email

Call

Final Liability:

%

(Agreed / Assessed)

BOLA S/N No. : 27

If NO or B 28, Ass. Lia :

Repair Cost: (W169C)

S\$ 2,354

COID (KAR - ENDED TP)

Loss of Rental (LOR):

S\$

(days)

Loss of Use (LOU):

S\$

400 (\$100 x 4 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\$

2,754

Global Sum S\$:

-

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

2,754.00

Name 1:

JIN AUTO SERVICES PTE LTD

Payee 2: (Strike if N.A.)

S\$

X

Name 2:

X

Payee 3: (Strike if N.A.)

S\$

X

Name 3: