

INS. CASE OWNER:

CC 4, 001 180 22315, R. hazy

LKK:

IDAC:

ASSIGNMENT

Surveyor:

KASUL

DOI:

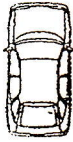
13/12/18

Date / Time:

6/12/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

FBI 10834

Name of Insured:

Ban Hock Hm Co Pte

Insured Tel No.:

HP:

Claim No.:

Excess Sec II : SS

D.O.A.:

6/12/18

Make / Model:

Place of Accident:

Bedok North Rd

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Nor Agy'au B. Yusoff

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

Driver Tel No.:

818 7124

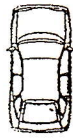
(V/L: YES / NO)

Insured Liability:

%

Final ? Yes / No

SFm 36366



INSRS:

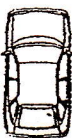
WSP:

Tel:

Liability:

RMKS:

Stuttgart



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

13/12

SFm 36366 - CCU/TP (800360918463 ; DPA: 13/12/18)
FBI 10834, NALINE (7017536/184 ; DPA: 11/09/2017)

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:

13/12/18 - vic

Documentation Check List: Handler Typist

Notification ltr (if non-pickup)

After call ltr to OI:

Authorisation To Act:

Release Voucher:

NO DV

Final Repair Bill:

Car Rental Invoice:

Towing Invoice

LTA / GIA:

Medical Bill:

PIR:

Mandate/Reject Instruction:

LOD

Payment Breakdown Form:

Post-Repair Photos:

Others:

13/12/18

- PLS REPAIRER. OLD REPAIR-ORDER TO TP.
SEND LETTER IN MAIL TO OI/OI
TO NOTIFY TP CLAIM IN NEW 10834.
- GMAIL LIABILITY CLARK
- PINKETED
- TP LOD IN BY GMAIL

01/01/19

- TYPE REPORT FOR WARRANT APPROVAL

31/5/19

- SETTLED \$10,167.83 WITH TP, PROCEED TO CLOSE
- TO CLOSE.

PRELIMINARY ADVICE

Date/Time:

13/12/18

Sent By:

93

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

PLP

SS

8,763.11

(

A

days)

Reduction:

21

%

Email

Call

FINAL SETTLEMENT

Date/Time:

21/05/19

Confirm with

TOLLY

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

27

If NO or B 28, Ass. Lia:

Repair Cost:

(w/last)

SS

9,365.83

LOD REPAIR-ORDER TP)

Loss of Rental (LOR):

SS

-

(

days)

Loss of Use (LOU):

SS

800.00 (\$160 x 5

days)

Loss of Income (LOI):

SS

-

(\$

x

days)

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

[Tick only one]

GIA/LTA Search

SS

2.00

Medical:

SS

-

Disbursement:

SS

-

(e.g. Tow/Independent)

Legal Cost

SS

-

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

TP

3) Survey fee:

\$400

Total:

SS

10,167.83

Global Sum SS:

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

SS

10,167.83

Name 1:

STUTTGART AUTO PTE LTD

Payee 2: (Strike if N.A.)

SS

-

Name 2:

Payee 3: (Strike if N.A.)

SS

-

Name 3: