

15/5/2010

INS. CASE OWNEP: **BONNIE**

CC **4** / AIG1802 **28/12/18** / **6/1/18**

LKK:  
IDAC:

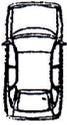
Surveyor: **XGQ**

DOI: **ASSIGNMENT 20/12/18**

Date / Time: **12/1/18**

Registered in Merimen: **20/1/18**

**Pre-assign / CCU / FTE**



Insured Vehicle No. : **SLZ 6110 Y**

Claim No. : **3789 5415859**

Name of Insured : **CHIA SHEN ZHUN**

Policy No. : **1800060185**

Insured Tel No. : \_\_\_\_\_ HP: \_\_\_\_\_

Make / Model : **MAZDA**

Excess Sec II : \$S \_\_\_\_\_ D.O.A : **15/1/18**

Place of Accident : **SERENITY ST - PARKER'S CONDO UP**

Is driver the owner? ( YES / NO ) Nature of Accident : \_\_\_\_\_

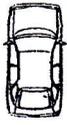
If NO, Driver Name / Age : **CHIA SHU MIN 34**

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

Driver Tel No. : \_\_\_\_\_ (V/L: **YES** / NO )

Insured Liability : % **Final ? Yes / No**

**SEP 2018**



INSRS: \_\_\_\_\_  
WSP: **Vins Automotive**  
Tel : \_\_\_\_\_  
Liability : \_\_\_\_\_  
RMKS: \_\_\_\_\_



INSRS: \_\_\_\_\_  
WSP: \_\_\_\_\_  
Tel : \_\_\_\_\_  
Liability : \_\_\_\_\_  
RMKS: \_\_\_\_\_



INSRS: \_\_\_\_\_  
WSP: \_\_\_\_\_  
Tel : \_\_\_\_\_  
Liability : \_\_\_\_\_  
RMKS: \_\_\_\_\_



INSRS: \_\_\_\_\_  
WSP: \_\_\_\_\_  
Tel : \_\_\_\_\_  
Liability : \_\_\_\_\_  
RMKS: \_\_\_\_\_

Date/ Time	STAGE	DATE/ PIC
<b>28/1/18</b>	<b>SEP 2018 - 4</b>	<b>SLZ 6110 Y - 4</b>
<b>20/1/18</b>	<b>OI HIT PARKED TP</b>	
<b>25-1-19 @ 208</b>	<b>CALLED - NO AWS.</b>	
<b>17/5/19</b>	<b>Called OJD to inform TP claim</b>	
<b>15/09/19</b>	<b>FINISHED</b>	
<b>04/10/19</b>	<b>TP LOP IN BY EMAIL</b>	
<b>15/09/19</b>	<b>SEND JET OFFER TO TP</b>	
<b>04/10/19</b>	<b>TP ACCEPTED OFFER.</b>	
	<b>ALL DONE IN ORDR.</b>	
<b>PRELIMINARY ADVICE</b>	Date/Time: _____ Sent By: _____	

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: <b>115</b>	\$S <b>6,000.00</b> ( <b>6</b> days) Reduction: <b>62</b> %		Email <input type="checkbox"/> Call <input type="checkbox"/>
<b>FINAL SETTLEMENT</b>	Date/Time: <b>04/10/19</b> Confirm with <b>RAYMOND</b>		Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>
Final Liability:	% <b>100</b> (Agreed / Assessed) BOLA S/N No. : <b>NIL</b>		If NO or B 28, Ass. Lia : <b>COLD HIT PARKED TP</b>
Repair Cost: <b>(w/ GST)</b>	\$S <b>6,420.00</b>		
Loss of Rental (LOR):	\$S <b>1,080.00</b> ( <b>9</b> days) X <b>120.00</b>		
Loss of Use (LOU):	\$S <b>-</b> ( <b>S</b> x days)		
Loss of Income (LOI):	\$S <b>-</b> ( <b>S</b> x days)		
LOR only <input checked="" type="checkbox"/> LOU only <input type="checkbox"/>	LOR + LOU <input type="checkbox"/> LOR + LO <input type="checkbox"/> [Tick only one]		
GIA/LTA Search	\$S <b>2.00</b>		
Medical:	\$S <b>-</b>		1) Claim status: <b>Normal</b> /Reject/Private Settle
Disbursement:	\$S <b>-</b> (e.g. Tow/ Independent )		2) Report Format: _____
Legal Cost	\$S <b>-</b>		3) Survey fee: <b>\$320.00</b>
<b>Total:</b>	\$S <b>7,502.00</b> Global Sum \$S: <b>-</b>		
<b>FINAL PAYMENT</b>	Date/Time: _____ Confirm with: _____		Email <input type="checkbox"/> Call <input type="checkbox"/>
Payee 1:	\$S <b>7,502.00</b> Name 1: <b>VIN'S MOTOR PTE LTD</b>		
Payee 2: (Strike if N.A.)	\$S <b>=</b> Name 2: <b>=</b>		
Payee 3: (Strike if N.A.)	\$S <b>=</b> Name 3: <b>=</b>		