

15/5/2010

INS. CASE OWNER:

CC 4 / LPC1900

0025, 4 p62

LKK:

IDAC:

Surveyor:

MURMS

DOI:

ASSIGNMENT

2/1/19

Date / Time :

2/1/19

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

GBC 2828B

Claim No. :

18/18/19/105/01179

Name of Insured :

Policy No. :

Insured Tel No. :

HP:

Make / Model :

Excess Sec II :SS

D.O.A :

29/1/18

Place of Accident :

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

SLN 66289



INSRS:

WSP:

Tel :

Liability :

RMKS:

Focus



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

SLN 66289-4

GBC 2828B-4

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:

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Repair Cost:

S\$

(

days) Reduction:

%

Confirm by:

FINAL SETTLEMENT

Date/Time:

Confirm with

Email

Call

Call

Call

Final Liability:

%

(Agreed / Assessed) BOLA S/N No. :

Repair Cost:

S\$

If NO or B 28, Ass. Lia :

Loss of Rental (LOR):

S\$

(

days)

Loss of Use (LOU):

S\$

(S

x

days)

Loss of Income (LOI):

S\$

(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\$

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

Total:

S\$

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Call

Payee 1:

S\$

Name 1:

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:

