

INS. CASE OWNER:

CC 4 / UPC 1900

0896 / Kha3m2

LKK:

IDAC:

Surveyor:

KSC

DOI:

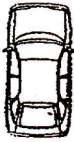
18/1/19

Date / Time:

18/1/19

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

PC 3958 L

Claim No.:

8/19/19/030/04328

Name of Insured:

Entraco Marine Gy. LLC

Policy No.:

Insured Tel No.:

HP:

Make / Model:

Excess Sec II :SS

D.O.A.:

19/1/19

Place of Accident:

Is driver the owner?

( YES / NO )

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

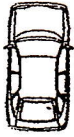
(V/L: YES / NO)

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

Insured Liability: %

Final ? Yes / No

SLV 17465



INSRS:

WSP:

Tel:

Liability:

RMKS:

optima



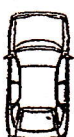
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

| Date/ Time |                                                                                                                       | STAGE                                    | DATE / PIC |
|------------|-----------------------------------------------------------------------------------------------------------------------|------------------------------------------|------------|
| 27/1/19    | SLV 17465-X;<br>PC 3958 L - call UPC 1900 to 24x9/6p3m2: 18/1/19                                                      | Non-Reporting ltr (1st):                 |            |
|            |                                                                                                                       | Non-Reporting ltr (2nd):                 |            |
|            |                                                                                                                       | Non-Reporting ltr (Final):               |            |
| 02/02/19   | - FINISHED<br>- FILE PROVIDED. OLD MOVING OUT FROM STATIONARY.                                                        | Notification ltr (if non-pickup):        |            |
|            |                                                                                                                       | Call OI:                                 |            |
|            |                                                                                                                       | After call ltr to OI:                    |            |
| 02/02/19   | - TYPE REPORT WHILE PENDING FOR TP LOD<br>- REPORT DONE                                                               | Documentation Check List: Handler Typist |            |
|            |                                                                                                                       | Notification ltr (if non-pickup)         |            |
|            |                                                                                                                       | After call ltr to OI:                    |            |
|            |                                                                                                                       | Authorisation To Act:                    |            |
| 27/02/19   | - TP LOD IN BY EMAIL                                                                                                  | Release Voucher:                         |            |
| 01/03/19   | - 900K WARRANTS APPROVAL TO LPC<br>- LPC APPROVED WARRANTS @ 50% IF NO TP VIDEO FOOTAGE.                              | Final Repair Bill:                       |            |
| 12/06/19   | - 900K 1ST OFFER TO TP.<br>- TP REJECTED OFFER. PROVIDED VIDEO<br>- 900K WARRANTS.<br>- LPC APPROVED 100000 WARRANTS. | Car Rental Invoice:                      |            |
| 14/06/19   | - 900K 2ND OFFER TO TP.<br>- TP ACCEPTED OFFER.                                                                       | Towing Invoice:                          |            |
| 24/06/19   |                                                                                                                       | LTA / GIA:                               |            |
|            |                                                                                                                       | Medical Bill:                            |            |
|            |                                                                                                                       | PIR:                                     |            |
|            |                                                                                                                       | Mandate/Reject Instruction:              |            |
|            |                                                                                                                       | LOD                                      |            |
|            |                                                                                                                       | Payment Breakdown Form:                  |            |
|            |                                                                                                                       | Post-Repair Photos:                      |            |
|            |                                                                                                                       | Others:                                  |            |

PRELIMINARY ADVICE

Date/Time: 18/01/19

Sent By: MK

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost: PIP

S\$ 3,368.84 ( 4 days) Reduction: 29 %

Email ☐ Call ☐

FINAL SETTLEMENT

Date/Time: 22/06/19

Confirm with: LK

Email ☐ Call ☐

Final Liability:

% 100 (Agreed / Assessed) BOLA S/N No. : NIL

If NO or B 28, Ass. Lia :

Repair Cost: (W/Loss)

S\$ 3,572.56

OLD MOVING OUT

Loss of Rental (LOR):

S\$ - ( days)

CTP VIDEO IN

Loss of Use (LOU):

S\$ 300.00 \$ 60 x 5 days

Loss of Income (LOI):

S\$ - (\$ x days)

LOR only ☐ LOU only ☐LOR + LOU ☐ LOR + LOI ☐ [Tick only one]

GIA/LTA Search

S\$ 2.00

Medical:

S\$ -

1) Claim status: Normal/Reject/Private Settle

Disbursement:

S\$ -

(e.g. Tow/ Independent)

2) Report Format:

Legal Cost

S\$ -

3) Survey fee:

\$ 450.00

Total:

S\$ 3,874.56

Global Sum S\$: -

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☐ Call ☐

Payee 1:

S\$ 3,874.56

Name 1:

OPTIMA WORKZ PTE LTD

Payee 2: (Strike if N.A.)

S\$ -

Name 2:

-

Payee 3: (Strike if N.A.)

S\$ -

Name 3:

-