

INS. CASE OWNER:

CHIEF HONG

CC 4 / MG 1900

0973

Bha3

LKK:

IDAC:

Surveyor:

Mr. Lim

DOI:

ASSIGNMENT

16/1/19

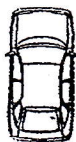
Date / Time:

16/1/19

Registered in Merinien:

16/1/19

Pre-assign / CCU / FTE



Insured Vehicle No. :

SLB5041X

Name of Insured :

Tan Wenbin Lgy

Insured Tel No. :

HP:

Claim No. :

806289950396

Policy No. :

Make / Model :

Excess Sec II :SS

D.O.A :

15/1/19

Place of Accident :

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. :

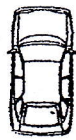
(V/L: YES / NO)

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

Insured Liability : %

Final ? Yes / No

SKR 2372M



INSRS:

WSP:

Tel :

Liability :

RMKS:

722225



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

27/1

juy

SKR 2372M - X; SLB 5041 X - X

H2R - 8527 - 100%

19/01/19

MUS PROVIDED. OI RATE-ENDED TP.
SEND LETTER TO OI TO NOTIFY TP CLAIM
W NCD ISSUES.

FINALIZED

TP LOD IN BY EMAIL

13/01/19

TYPE REPORT FOR WARRANT APPROVAL
REPORT DONE

05/10/19

SUBK WARRANT APPROVAL TO MIG

08/10/19

MIG APPROVED WARRANT.

09/10/19

SEND ACCEPTANCE EMAIL TO TP

ALL DOCS IN ORDER

TO CLOSE.

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: 19/01/19 - UK

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:

Confirm by:

Repair Cost:

Lg

S\$ 8,000.00

(7

days) Reduction:

19

%

Email

Call

FINAL SETTLEMENT

Date/Time:

09/10/19

Confirm with

RACHEL

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No. :

27

If NO or B 28, Ass. Lia :

Repair Cost:

(w/1650)

S\$ 8,560.00

Loss of Rental (LOR):

S\$

100.00

(4

days) x \$ 100

Loss of Use (LOU):

S\$

-

(\$

x

days)

Loss of Income (LOI):

S\$

-

(\$

x

days)

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

S\$

31.00

Medical:

S\$

-

Disbursement:

S\$

-

(e.g. Tow/ Independent)

Legal Cost

S\$

-

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$520.00

Total:

S\$ 8,991.00

Global Sum S\$: -

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

8,991.00

Name 1:

TORQUE 5 PTE LTD

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

Payee 3: (Strike if N.A.)

S\$

-

Name 3: