

INS. CASE OWNER:

CC

Y Asm

1900

1080

A has

LKK:

IDAC:

94122

Surveyor:

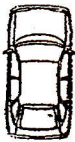
DOI:

ASSIGNMENT

Date / Time

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

Name of Insured :

Insured Tel No. :

Excess Sec II :SS

Is driver the owner?

(YES / NO)

HP:

D.O.A :

Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

Claim No. :

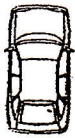
Policy No. :

Make / Model :

Place of Accident :

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

Insured Liability : % Final ? Yes / No



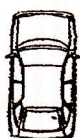
INSRS:

WSP:

Tel :

Liability :

RMKS:

Success
undel

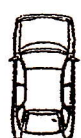
INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

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: 04/05/19 - vic

Documentation Check List: Handler Typist

Notification ltr (if non-pickup)

After call ltr to OI: email

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: by form

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost: P/P

S\$ 1,568.96 (3 days) Reduction: 62 %

Email ☐ Call ☐

FINAL SETTLEMENT

Date/Time: 04/06/19

Confirm with: SIKINA

Email ☒ Call ☐

Final Liability:

% 100 (Agreed / Assessed) BOLA S/N No. : 9

If NO or B 28, Ass. Lia :

Repair Cost: (w/ass)

S\$ 1,678.79

COIT FROM MINOR PD)

Loss of Rental (LOR):

S\$ - (days)

Loss of Use (LOU):

S\$ 400.00 (\$100 x 4 days)

Loss of Income (LOI):

S\$ - (\$ x days)

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

GIA/LTA Search

S\$ 7.45

Medical:

S\$ -

1) Claim status: Normal/Reject/Private Settle

Disbursement:

S\$ -

(e.g. Tow/ Independent)

2) Report Format:

Legal Cost

S\$ -

3) Survey fee:

4000.00

Total:

S\$ 2,086.24

Global Sum S\$: -

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☐ Call ☐

Payee 1:

S\$ 2,086.24

Name 1:

SUCCESS UNITED PTG LTD

Payee 2: (Strike if N.A.)

S\$ -

Name 2:

-

Payee 3: (Strike if N.A.)

S\$ -

Name 3:

-