

15/5/2010

INS. CASE OWNER:

CC 3, ALA 1900 1177, #ha3

LKK:

IDAC:

Surveyor:

STOVE

DOI:

ASSIGNMENT

25/02/19

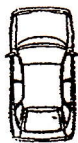
Date/Time:

18/1/19

Registered in Merimen:

18/1/19

Pre-assign / CCU / FTE



Insured Vehicle No.:

SIN 9943C

Name of Insured:

KING TIC PROPERTY PLC

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A:

Nature of Accident:

Is driver the owner?

(YES / NO)

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

CR 6866A



INSRS:

WSP:

Tel:

Liability:

RMKS:

mm



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time		STAGE	DATE / PIC
21/1	CR 6866A-X; SIN 9943C-X	Non-Reporting ltr (1st):	
		Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
31/1/19	- PLS REQUIRD. OLD (HIRE) RATE - ENDED TP) - SEND LETTER TO OI. - EMAIL LIABILITY CLERK - FINALIZED - ORIGINAL TP LOD IN	Call OI:	
		After call ltr to OI:	31/1/19-UC
10/10/19	- CONFIRMED AMOUNT SAME AS LOD - AW DOC IN ORDER. - TO CLOSE.	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: P/P S\$ 3,121.15 (3 days) Reduction: 10 %

Email ☐ Call ☐

FINAL SETTLEMENT

Date/Time:

Confirm with:

Email ☐ Call ☐

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

If NO or B 28, Ass. Lia:

Repair Cost: (w/LOD) S\$ 3,889.63

COIP RATE ENDED TP)

Loss of Rental (LOR) (w/LOD) S\$ 221.70 (3 days) x 70

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\$ 7.45

Medical: S\$ -

Disbursement: S\$ - (e.g. Tow/ Independent)

Legal Cost S\$ -

Total: S\$ 3,571.78

Global Sum S\$:

Email ☐ Call ☐

FINAL PAYMENT

Date/Time:

Confirm with:

Payee 1: S\$ 3,347.08

Name 1:

PERFORMANCE MOTORS LIMITED

Payee 2: (Strike if N.A.) S\$ 221.70

Name 2:

SIM EE SIM. DARREN

Payee 3: (Strike if N.A.) S\$ -

Name 3: