

INS. CASE OWNER:

Ang (11)

CC 4 / LPC 1900 1560 / THA39

LKK:

IDAC:

Surveyor:

Tan Ahk

DOI:

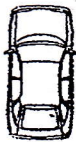
12/2/2019

Date / Time:

23/1/19

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

8KJ 5841Z

Name of Insured :

Wan Kok Tong

Insured Tel No. :

HP:

96880619

Excess Sec II :SS

D.O.A :

21/1/2019

Is driver the owner? (YES / NO)

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

Claim No. :

18/1/19/4005/024356

Policy No. :

Make / Model :

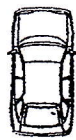
Place of Accident :

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

Insured Liability : %

Final ? Yes / No

SMH 1520M



INSRS:

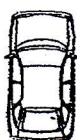
WSP:

Tel :

Liability :

RMKS:

pml



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

20/1/19
CPL

SMH 1520M - X; 8KJ 5841Z - X

02 reversing and collided into TP vehicle.
e-mail liability clear.

pending survey

pending finalise OK

pending LOD

- FINANCIAL

- ORIGINAL TP LOD IN

- TYPE REPORT FOR MANDATE APPROVAL

- GIVE MANDATE APPROVAL TO LPC

- LPC APPROVED MANDATE

- SEND ACCEPTANCE EMAIL TO TP.

- ALL DONE 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: 10/5/2019

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:

27/2/2019

Sent By:

CPL

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

P/P

S\$

2,185.95

(3 days)

Reduction:

13 %

Email

Call

FINAL SETTLEMENT

Date/Time:

09/08/19

Confirm with:

CAROLINE

Email

Call

Final Liability:

%

100

(Agreed / As d)

BOLA S/N No. :

N/A

If NO or B 28, Ass. Lia :

Repair Cost: (w/cost)

S\$

2,659.97

Loss of Rental (LOI) (w/cost)

S\$

149.80

(2 days)

x 470

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\$

2.00

Medical:

S\$

-

Disbursement:

S\$

-

Legal Cost

S\$

-

Total:

S\$

2,811.77

Global Sum S\$:

-

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

2,811.77

Name 1:

PERFORMANCE MOTORS LIMITED

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

-

Payee 3: (Strike if N.A.)

S\$

-

Name 3:

-

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

4,150.00