

INS. CASE OWNER:

Sunderi

CCA / III18001726

1 Kkb3

LKK:  
IDAC

LIABILITY

Surveyor:

KENNETH

DOI:

3/01/18

Date / Time:

29/01/18

Registered in Merimen:

29/01/18

Pre-assign / CCU / FTE



Insured Vehicle No.:

SH 67530

Name of Insured:

CTPL

Insured Tel No.:

HP:

Claim No.:

MT18010614

Policy No.:

Excess Sec II :SS

D.O.A:

20/01/18

Make / Model:

HYUNDAI I40

Place of Accident:

KOEK ROAD NEAR CUPPAGE PLAZA

Is driver the owner? (YES / NO)

(NO)

Nature of Accident:

If NO, Driver Name / Age: CHOW ENG THAM

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

Driver Tel No.:

(V/L: YES / NO)

Insured Liability: %

Final ? Yes / No

SKC 71761



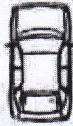
INSRS:

WSP: Lim Tan Motor

Tel:

Liability:

RMKS:



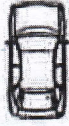
INSRS:

WSP:

Tel:

Liability:

RMKS:



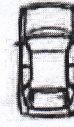
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/Time

DATE / PIC

02/01/18 (2am)

SKC 71761 - X, SH 67530 - X

OI 9th footage. Potentially after car accident reported to not into his phone

02.02.2018

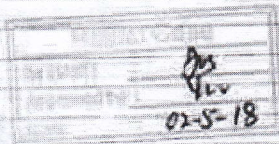
FILES REVIEWED. CASE OF CONFLICTING VERSION. BOTH REPORTED EACH OTHER CHANGING. REQUEST FOR VIDEO SEC. LIABILITY MANDATE FOR AUTOMATION.

① video in merimen.

17-02-18

TO REJECT TP CLAIM AS TP GRAZED TAXI WHILE MOVING TOWARDS LEFT LANE. (SEE COMMENTS)

RECEIVED 02 MAY 2018



VIDEO - OI STATIONARY WHEN TP MOVE

STAGE

Non-Reporting ltr (1st)

Non-Reporting ltr (2nd)

Non-Reporting ltr (Final)

Notification ltr (if non-pickup)

Call OI

After call ltr to OI

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:

S\$

(

days) Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

1-2-19

Confirm with:

MANDY

Email

Call

Final Liability:

%

50

(Agreed / Assessed) BOLA S/N No. NIL

If NO or B 28, Ass. Lia:

Repair Cost:

1712

S\$

856.x4

(conflicting version)

Both reported each other changing loc.

Loss of Rental (LOR):

S\$

-

(days)

Loss of Use (LOU):

300

S\$

150 (3 100 x 3)

(days)

Loss of Income (LOI):

S\$

-

(\$ x days)

LOR only

LOU only

S\$

-

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

S\$

-

Medical:

S\$

-

Disbursement:

S\$

-

(e.g. Tow/ Independent)

Legal Cost:

S\$

-

Total:

S\$ 1,006

Global Sum S\$:

Email

Call

FINAL PAYMENT

Date/Time:

Confirm with:

Payee 1:

S\$

1,006

Name 1:

LIM TAN MOTOR PRE LTD

Payee 2 (Strike if N/A)

S\$

x

Name 2:

Payee 3 (Strike if N/A)

S\$

x

Name 3:

1-2-19 III MANDATE TO SETTLE 50%

COPY SENT

1) Claim status: Normal/Reject/Private Settle

2) Report Format

3) Survey fee:

B 250

COPY SENT