

15/5/2010

INS. CASE OWNER:

CC /AIG1900

LKK:
IDAC:

Surveyor:

kaml

DOI:

ASSIGNMENT

27/1/19

Date / Time :

12/1/19

Registered in Merimen:

12/1/19

Pre-assign / CCU / FTE



Insured Vehicle No. :

SJN 77249

Name of Insured :

Yoonah Khaw Yeen Gene

Insured Tel No. :

HP:

D.O.A :

8/1/19

Excess Sec II :SS

Is driver the owner?

(YES / NO)

Nature of Accident :

Claim No. :

9476 79151756

Policy No. :

200403937-05

Make / Model :

FVA

Place of Accident :

KPE TMS TAMPINES.

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

SKS 7715P



INSRS:

WSP:

Tel :

Liability :

RMKS:

Performance



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/Time

19/1/19
12/1/19

File pass to type mandate

14/10/19
12/1/19

- File pass to shu pi 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:

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:

Repair Cost:

P/P

SS 10,065.30

(7 days)

Reduction:

33 %

Confirm by:

FINAL SETTLEMENT

Date/Time:

Confirm with

caroline

Email ☐ Call ☐

Final Liability:

% 100

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

27

Email ☒ Call ☐

Repair Cost:

SS

10,773.08

If NO or B 28. Ass. Lia :

(OL RBAR END TP)

Loss of Rental (LOR):

SS

900

(9 days)

x \$100

Loss of Use (LOU):

SS

-

(S

x

days)

Loss of Income (LOI):

SS

-

(S

x

days)

LOR only ☒ LOU only ☐

LOR + LOU

LOR + LO

[Tick only one]

GIA/LTA Search

SS

2.00

Medical:

SS

-

Disbursement:

SS

-

(e.g. Tow/ Independent)

Legal Cost

SS

-

Total:

SS

11,675.08

Global Sum \$S:

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

TP

3) Survey fee:

\$ 320

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☐ Call ☐

Payee 1:

SS

11,675.08

Name 1:

PERFORMANCE MOTORS LIMITED

Payee 2: (Strike if N.A.)

SS

Name 2:

Payee 3: (Strike if N.A.)

SS

Name 3: