

INS. CASE OWNER:

CHUAN KUN NONG

CC 3 / MG 1900

2817, AH 13

LKK:

IDAC:

Surveyor:

UMP

DOI:

ASSIGNMENT

21/7/19

Date / Time:

Registered in Merimen:

14/2/19
14/2/19

Pre-assign / CCU / FTE



Insured Vehicle No.:

SKJ913314

Name of Insured:

Tracey Yuen Chih-Chian

Insured Tel No.:

HP:

D.O.A

5/12/19

Excess Sec II :SS

Is driver the owner?

(YES / NO)

Nature of Accident:

Claim No.:

9815908518 SG

Policy No.:

Make / Model:

Place of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L) YES / NO

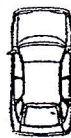
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

GBW 1282B



INSRS:

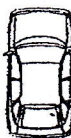
WSP:

Tel:

Liability:

RMKS:

Premium



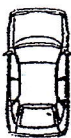
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

STAGE

DATE / PIC

28/2

GBW 1282B - X; SKJ913314 - X

o/mr. sent out 1st letter.

- TP VIDEO UPLOADED IN WORKING

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

After call ltr to OI:

JULY 8-3-19

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:

8-3-19 @ 525 w/ OI TRACEY. HE
CONFIRMED. AGREED
& MAKE NCR ISSUE.

DAY 5

- TP LOD IN BY EMAIL

- SEND ACCEPTANCE EMAIL TO TP

- ALL DOCS IN ORDER

- TO CLOSE.

PRELIMINARY ADVICE

Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

P/P

S\$

1,915.00

(3

days)

Reduction:

70

%

Email

Call

FINAL SETTLEMENT

Date/Time:

22/08/19

Confirm with:

KOWIN

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

27

If NO or B 28, Ass. Lia:

Repair Cost:

(w/645)

S\$

2,081.79

01 PHL-EMBED TP

Loss of Rental (LOR):

S\$

(

days)

Loss of Use (LOU):

S\$

180.00

(\$60

x 3

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\$

-

1) Claim status: Normal/Reject/Private Settle

Disbursement:

S\$

-

(e.g. Tow/ Independent)

2) Report Format:

Legal Cost

S\$

-

3) Survey fee:

\$320.00

Total:

S\$

2,263.79

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

2,083.79

Name 1:

PREMIUM AUTOMOBILES PTE LTD

Payee 2: (Strike if N.A.)

S\$

180.00

Name 2:

PINA HWBE CHY DERRICK

Payee 3: (Strike if N.A.)

S\$

-

Name 3:

-