

INS. CASE OWNER:

CC 4, 116 1900 2858, R1ha3

LKK:

IDAC:

Surveyor:

RAGM

DOI:

ASSIGNMENT

215/19

Date / Time:

14/2/19

Registered in Merimen:

16/2/19

Pre-assign / CCU / FTE

8J226420



Insured Vehicle No. :

Claim No. :

Name of Insured :

Policy No. :

Insured Tel No. :

HP:

Make / Model :

Excess Sec II :SS

D.O.A : 1/2/19

Place of Accident :

Is driver the owner? (YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. :

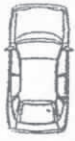
(V/L: YES / NO)

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

Insured Liability : %

Final ? Yes / No

PC9396T



INSRS:

WSP:

Tel :

Liability :

RMKS:

11am work



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

PC9396T } MATANA 1900 2445/24 ; DOA: 1/2/19
8J226420

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:

Confirm by:

Repair Cost: L/S S\$ 2950.00

(4

days)

Reduction: 4827.41

% 62

Email ☐ Call ☐

FINAL SETTLEMENT

Date/Time: 13/01/2021

Confirm with JIA CHENG

Email ☒ Call ☐

Final Liability:

% 50

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

If NO or B 28, Ass. Lia :

Repair Cost: 3156.50

S\$ 1578.25

W/GST

Loss of Rental (LOR):

S\$

(

days)

Loss of Use (LOU): 540.00

S\$ 270.00

(\$ 90

x 6

days)

CONFLICTING VERSION

Loss of Income (LOI):

S\$

(\$

x

days)

LOR only ☐ LOU only ☒LOR + LOU ☐LOR + LOI ☐

[Tick only one]

GIA/LTA Search

S\$ 29.00

Medical:

S\$

1) Claim status: ☒ Normal/Reject/Private Settle

Disbursement:

S\$

(e.g. Tow/ Independent)

2) Report Format:

TP

Legal Cost

S\$

3) Survey fee:

\$320.00

Total:

S\$ 1877.25

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☒ Call ☐

Payee 1:

S\$ 1877.25

Name 1:

TEAMWORK GARAGE PTE LTD

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:

