

15/5/2010

INS. CASE OWNER:

NORWAY

CC

/AIG1900

LKK:

IDAC:

Surveyor:

marcus

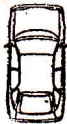
DOI:

ASSIGNMENT

Date / Time:

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

Name of Insured:

Insured Tel No.:

Excess Sec II : \$\$

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

Claim No.:

Policy No.:

Make / Model:

Place of Accident:

OI GIA REPORT: YES / NO

TP GIA REPORT: YES / NO

Insured Liability: %

Final ? Yes / No

SKU 1087c



INSRS:

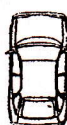
WSP:

Tel:

Liability:

RMKS:

SPECIALIST



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

11/05/19 @
11:22AM

11/04/19

21/06/19

SKU 1087c
SPECIALIST
SPOKE TO OI HUSBAND MR LOH.
OUI WHO AUTHORIZED TO DRIVE
VEHICLE. HE IS AWARE OF ACCIDENT
& OUI KENT-OWNED TP. INFORMED
TP OUI HUSBAND TO SPOKE &
HUSBAND NDO REPAIR. OUI OUI TO
OI.
- GMAIL CAPTIVITY CHECK
- PINKUPED
- ORIGINAL TP LOB IN
- SEND 1ST OFFER TO TP.
- SPOKE TO TP (HUSBAND), OUI OUI WILL CLAIM
INJURY.
- TP ACCEPTED OFFER.
- ALL BOSS 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: 11/05/19 - OUI

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:

P/P

S\$ 5,298.81

(4

days) Reduction:

46

%

Email ☐Call ☐

FINAL SETTLEMENT

Date/Time:

Confirm with:

Confirm by:

Final Liability:

%

100

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

HUI LIN

Email ☒Call ☐

Repair Cost:

(W/GAS)

S\$ 5,669.73

Loss of Rental (LOR):

S\$

-

(

days)

Loss of Use (LOU):

S\$

600.00

(\$100

x 6

days)

KENTH COM.

Loss of Income (LOI):

S\$

-

(\$

x

days)

LOR only ☐LOU only ☐LOR + LOU ☐LOR + LO ☐

[Tick only one]

GIA/LTA Search

S\$

2.00

Medical:

S\$

-

Disbursement:

S\$

-

(e.g. Tow / Independent)

Legal Cost

S\$

-

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$320.00

Total:

S\$

6,271.73

Global Sum S\$:

6,270.00

FINAL PAYMENT

Date/Time:

Confirm with:

Confirm by:

Payee 1:

S\$

6,270.00

Name 1:

SPECIALISTS MOTOR PTE LTD

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

-

Payee 3: (Strike if N.A.)

S\$

-

Name 3:

-