

D.B. CASE OWNER:

CC

1900

LKK:

IDAC:

ASSIGNMENT

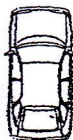
Surveyor:

DOI:

Date / Time:

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

Name of Insured:

Insured Tel No.:

HP:

Excess Sec II :S\$

D.O.A.:

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

Claim No.:

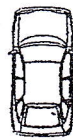
Policy No.:

Make / Model:

Place of Accident:

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

Insured Liability: % Final ? Yes / No



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

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:

01/02/19

Sent By:

JOY

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

45

S\$ 2,100.00

(4

days)

Reduction:

68

%

Email

Call

FINAL SETTLEMENT

Date/Time:

24/02/19

Confirm with

SUEAN

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

23

If NO or B 28, Ass. Lia:

Repair Cost:

S\$ 2,100.00

Loss of Rental (LOR):

S\$

-

(days)

Loss of Use (LOU):

S\$

100.00

(\$ 80 x 6

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\$

-

Disbursement:

S\$

-

(e.g. Tow/ Independent)

Legal Cost

S\$

-

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$ 450.00

Total:

S\$

2,582.00

Global Sum S\$:

-

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

2,582.00

Name 1:

LIU'S BROTHER AUTO ENGINEERING WORKSHOP

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

-

Payee 3: (Strike if N.A.)

S\$

-

Name 3:

-