

INS. CASE OWNER:

CC 4/601

1900

3937

Uha3

LKK:

IDAC:

Surveyor:

Marius

DOI:

ASSIGNMENT

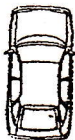
5/3/19

Date / Time:

11/3/2019

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

6737482

Claim No.:

Name of Insured:

KIAN AN CYRONA HARDWARE TRADING

Policy No.:

Insured Tel No.:

HP:

Make / Model:

Excess Sec II :SS

D.O.A.:

1/1/19

Place of Accident:

UTIVE ROAD

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

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

Driver Tel No.:

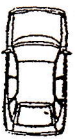
(V/L: YES / NO)

Insured Liability:

%

Final ? Yes / No

SLT7316 X



INSRS:

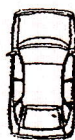
WSP:

Tel:

Liability:

RMKS:

Progression



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

16/3

11/3

SLT7316 X. X;

6737482 - M/11/11/19 18349/d2 : m/25/1/19

LOR received.

23/4/19 @ 11.50am

- Khanchana

- Spoken to OI (Co rep - not willing to tell his name).
He confirmed the mva. Informed OI on TP
claim and aware NCD will be affected if
applicable.

- NO ACCUSED B/L

- MINUSSED.

- TP LOD IN BY BUNIL

18/05/19

- 98ND ACCEPTANCE EMAIL TO TP.

- NO BV. ALL DOCS 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:

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:

15/02/19

Sent By:

a3

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

PK

S\$ 2,119.00

(3

days)

Reduction:

35

%

Email

Call

FINAL SETTLEMENT

Date/Time:

18/05/19

Confirm with:

PM WBN

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

23

If NO or B 28, Ass. Lia:

Repair Cost: (w/gst)

S\$ 2,267.33

COLO OUPTRING TP)

Loss of Rental (LOR):

S\$ 300.00

(3

days)

x \$100.00

Loss of Use (LOU):

S\$ -

(\$

x

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:

\$400.00

Total:

S\$ 2,569.33

Global Sum S\$:

-

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$ 2,569.33

Name 1:

PROGRESSIVE CAR CARE PTE LTD

Payee 2: (Strike if N.A.)

S\$ -

Name 2:

-

Payee 3: (Strike if N.A.)

S\$ -

Name 3:

-