

INS. CASE OWNER:

CC 3 / CTI 1900 5058 / K332

LKK:

IDAC:

Surveyor:

KSC

DOI:

ASSIGNMENT

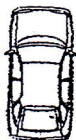
18/11/19

Date / Time:

18/11/19

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SJK 45320

Name of Insured:

Muhammad Nasrudin B. A Rahman

Insured Tel No.:

HP:

Claim No.:

SNM19DZ01180C0Z(b4)

Policy No.:

DMPCEN 3020931801

Excess Sec II :SS

D.O.A:

11/3/2019

Make / Model:

Place of Accident:

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

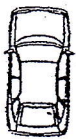
Driver Tel No.:

(V/L: YES / NO)

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

Insured Liability: % Final? Yes / No

SHO 620 U



INSRS:

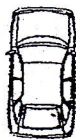
WSP:

Tel:

Liability:

RMKS:

Trans Cab



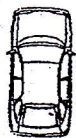
INSRS:

WSP:

Tel:

Liability:

RMKS:



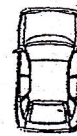
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

SHO 620 U - NA/CTI 1900 46151/3 : DOA: 11/3/19
 SJK 45320 - NA/CTI 1900 46151/3 : DOA: 28/11/18
 - NA/CTI 1900 46151/3 : DOA: 11/3/19

- MINAUBED

- ORIGINAL TP LOD IN

09/09/19

- PIR REVIEWED. CONDUCTING VIBRATIONS.
 OI REPORTED TP CUT CABLE & HE GOT
 VIDEO FOOTAGE. SEND LETTER TO OI &
 EMAIL TO NOTIFY TP CLAIM.
 EMAIL TO TP REQUEST FOR EVIDENCE
 TP NO EVIDENCE (VIDEO/PHOTO)

26/09/19

- NPE REQUEST FOR WARRANTS APPROVAL
 REPORT DONE.

07/12/19

- SEND WARRANTS APPROVAL TO CTI.
 CTI APPROVED WARRANTS @ 50%.

09/12/19

- SEND 1st OFFER TO TP

10/12/19

- TP ACCEPTED OFFER
 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: 09/09/19 - UK

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: 19/03/19

Sent By: QB

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost: P/P

S\$ 4,260.64 (4 days) Reduction:

%

Email ☐ Call ☐

FINAL SETTLEMENT

Date/Time: 10/12/19

Confirm with: WAI YIN

Email ☒ Call ☐

Final Liability:

%

50

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

NIL

If NO or B 28, Ass. Lia:

Repair Cost: (3100) \$4,558.88 S\$ 2,279.44

CCONDUCTING VIBRATIONS

Loss of Rental (LOR):

S\$

155.40

(3 days) X \$103.60

Loss of Use (LOU):

S\$

-

(\$

x

days)

Loss of Income (LOI):

S\$

75.00

(\$ 50 x 3 days)

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

[Tick only one]

GIA/LTA Search

S\$

7.49

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: \$5,027.17

S\$

2,517.33

Global Sum S\$: 2,500.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☐ Call ☐

Payee 1:

S\$

2,500.00

Name 1:

TRANS-CAB AUTO SERVICES PTE LTD

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

-

Payee 3: (Strike if N.A.)

S\$

-

Name 3:

-