

INS CASE OWNER

CC 3 / LPC1700

LKK
IDAC

Surveyor

Kalvin

DOI:

ASSIGNMENT

10/2/17

Date / Time

10/2/17

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.

SJB 7201L

Name of Insured

Lim Bee Bu

Insured Tel No.

HP:

9119 8801

Excess Sec II :SS

D.O.A

6/2/17

Is driver the owner?

(YES / NO)

Nature of Accident

If NO, Driver Name / Age

Lim Sang 61

Driver Tel No.:

(V/L: YES / NO)

Claim No.:

17/17/17/VP05/019676

Policy No.:

217VP05013016

Make / Model:

Hyundai Avante - 1'6 191

Place of Accident

Upper Bkt Timah road

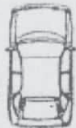
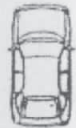
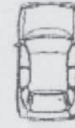
OI GIA REPORT YES NO ; TP GIA REPORT YES / NO

Insured Liability %

Final ? Yes / No

INSRS
WSP:
Tel:
Liability:
RMKS:

SMB 1849H

INSRS
WSP:
Tel:
Liability:
RMKS:INSRS
WSP:
Tel:
Liability:
RMKS:INSRS
WSP:
Tel:
Liability:
RMKS:

Date / Time

13/2/17

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

22/11/17 @ 11:50 File pass to typist to prepare report

27-02-20 NO RESPONSE FROM TP TILL DATE ON THE SCENE PHOTO.
CANCEL CASE WILL REOPEN IF TP RETURN.

PRELIMINARY ADVICE Date/Time

Sent By

FINALIZATION

Date/Time

Confirm with

Confirm by:

Repair Cost:

S\$ 830

days Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time

Confirm with

Email

Call

Final Liability:

%

50

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

Nil

If NO or B 28, Ass. Lia:

Repair Cost:

S\$ 830

S\$ 415.00

Loss of Rental (LOR):

S\$

1

days

Loss of Use (LOU):

S\$

275.00

(S 275 x 2 days)

Loss of Income (LOI):

S\$

0

x days

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

S\$

5.00

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

Total:

S\$

695.00

Global Sum S\$:

FINAL PAYMENT

Date/Time

Confirm with

Email

Call

Payee 1:

S\$

Name 1:

Payee 2 (Strike if N.A.):

S\$

Name 2:

Payee 3 (Strike if N.A.):

S\$

Name 3:

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee

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