

INS. CASE OWNER:

Wany Peter

CC 4, Asm 1900

6133

Ugia3

LKK:
IDAC:

109162

Surveyor:

M. P. M.

DOI:

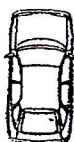
8/4/19

Date / Time:

8/4/2019

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SHO 501E

Name of Insured:

TIC SVS P/L

Insured Tel No.:

HP:

Excess Sec II :SS

5,000.00

D.O.A.:

4/4/19

Is driver the owner?

(YES / NO)

Nature of Accident:

Claim No.:

99mo1559

Policy No.:

Make / Model:

Place 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

FBN 4912U



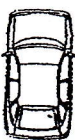
INSRS:

WSP:

Tel:

Liability:

RMKS:

LCS
bfr.

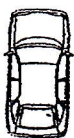
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

18/4

Joy

FBN 4912U

FBN 4912U - X;

SHO 501E - CC3/CT11 70190351/ku352; DOA: 3/4/19

- Reg. Act / PIC from FBN
- Email 101.

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:

7 CPL
16/4/19

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\$ 1843.40

(3 days)

Reduction: 672.80

% 37.

Email

Call

FINAL SETTLEMENT

Date/Time:

27/12/2019

Confirm with

Price.

Email

Call

Final Liability:

% 100

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

8

Repair Cost:

S\$

1972.44

(initial)

If NO or B 28, Ass. Lia:

old turning right

to driving straight

Loss of Rental (LOR):

S\$

(

days)

Loss of Use (LOU):

S\$

120.00

(\$ 20

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\$

7.45

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

TP

3) Survey fee:

#350/-

Total:

S\$

2099.89.

Global Sum S\$:

2050.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

2050.00

Name 1:

Kan Fook Sing motor workshop.

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3: