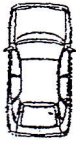


Surveyor: LHP DOI: 29/4/19 Date / Time: 29/4/19
Registered in Merimen: 30/4/19

Pre-assign / CCU / FTE



Insured Vehicle No. : SKN 2658K
Name of Insured : Ma Yu Lin
Insured Tel No. : HP:
Excess Sec II :SS D.O.A: 29/4/2019
Is driver the owner? (YES / NO) Nature of Accident :

Claim No. : B93A4332775G h2
Policy No. :
Make / Model :
Place of Accident :

If NO, Driver Name / Age :

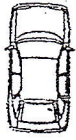
Driver Tel No. :

(V/L: YES / NO)

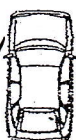
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % Final ? Yes / No

SJP 9322-J



INSRS:
WSP: premium car
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date / Time		STAGE	DATE / PIC
	<u>SJP 9322-J - MHAmy 61 30 18 2019/4 : DTA: 01/10/2013</u>	Non-Reporting ltr (1st):	
	<u>SKN 2658K - X</u>	Non-Reporting ltr (2nd):	
	<u>- TO GET OI VIDEO FOOTAGE</u>	Non-Reporting ltr (Final):	
	<u>- TP LOD IN BY EMAIL</u>	Notification ltr (if non-pickup):	
		Call OI:	
		After call ltr to OI:	<u>21/06/19 - SUMM</u>
<u>21/6/19</u>	<u>- OI informed of TP claim</u>	Documentation Check List: Handler Typist	
	<u>- Letter sent out.</u>	Notification ltr (if non-pickup)	☐
	<u>- OI VIDEO UPLADED IN INFORMATION BY AG</u>	After call ltr to OI:	☒
		Authorisation To Act:	☒
<u>29/07/19</u>	<u>- send acceptance email to TP.</u>	Release Voucher:	☒
	<u>- all docs IN ORDER.</u>	Final Repair Bill:	☒
	<u>- TO CLOSE.</u>	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:	<u>LH</u>	S\$ <u>5,150.00</u>	(<u>7</u> days) Reduction: <u>53</u> %	Email ☐ Call ☐
FINAL SETTLEMENT		Date/Time: <u>29/04/19</u>	Confirm with: <u>AUN TONG</u>	Email ☒ Call ☐
Final Liability:	% <u>100</u>	(Agreed / Assessed)	BOLA S/N No. : <u>NIL</u>	If NO or B 28, Ass. Lia :
Repair Cost:	S\$ <u>5,150.00</u>			<u>OI CHANGED CAR</u>
Loss of Rental (LOR):	S\$ <u>-</u>	(<u>-</u> days)		<u>OI VIDEO IN</u>
Loss of Use (LOU):	S\$ <u>360.00</u>	(<u>\$60</u> x <u>6</u> days)		
Loss of Income (LOI):	S\$ <u>-</u>	(<u>\$</u> x <u>-</u> days)		
LOR only ☐ LOU only ☒	LOR + LOU ☐ LOR + LOI ☐	[Tick only one]		
GIA/LTA Search	S\$ <u>7.45</u>			
Medical:	S\$ <u>-</u>			1) Claim status: <u>Normal</u> / Reject / Private Settle
Disbursement:	S\$ <u>-</u>	(e.g. Tow/ Independent)		2) Report Format:
Legal Cost	S\$ <u>-</u>			3) Survey fee: <u>\$320.00</u>
Total:	S\$ <u>5,574.45</u>	Global Sum S\$:	<u>-</u>	
FINAL PAYMENT		Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S\$ <u>5,574.45</u>	Name 1:	<u>PREMIUM CARE SERVICES PTE LTD</u>	
Payee 2: (Strike if N.A.)	S\$ <u>-</u>	Name 2:	<u>-</u>	
Payee 3: (Strike if N.A.)	S\$ <u>-</u>	Name 3:	<u>-</u>	