

CC3/LPC19007818/K1es3q2

15/5/2018

INS. CASE OWNER:

CC3/LPC1900

LKK:

IDAC:

Surveyor:

Kalvin

DOI:

ASSIGNMENT
✓ 5/1/18

Date / Time :

15/5/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

SKK 1207

Claim No. :

Name of Insured :

Policy No. :

Insured Tel No. :

HP:

Make / Model :

Excess Sec II :\$S

D.O.A :

15/5/18

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

SHB4433L



INSRS:

WSP:

Tel :

Liability :

RMKS:

WSP

W



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time	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:	Sent By:
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FINALIZATION	Date/Time:	Confirm with:	Confirm by: AWK
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Repair Cost:	P/P	\$S 1,794.32	(2 days) Reduction: 27 %	Email ☐ Call ☐
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FINAL SETTLEMENT	Date/Time: 25.03.21	Confirm with: KAZALI	Email ☐ Call ☐
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Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 15	If NO or B 28. Ass. Lia :
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Repair Cost:	w/GST	\$S 1,919.92	OID CHANGED LANE HIT TP
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Loss of Rental (LOR):	\$S 112.67	(1 days)	
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Loss of Use (LOU):	\$S -	(\$ x 1 days)	
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Loss of Income (LOI):	\$S 50.00	(\$ 50 x 1 days)	
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LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LO ☒	[Tick only one]		
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GIA/LTA Search	\$S 7.49		
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Medical:	\$S -		1) Claim status: Normal/Reject/Private Debit
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Disbursement:	\$S -	(e.g. Tow/ Independent)	2) Report Format: TP
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Legal Cost	\$S -		3) Survey fee: \$450
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Total:	\$S 2,090.08	Global Sum \$S: 2,090.00	
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FINAL PAYMENT	Date/Time: 25.03.21	Confirm with: KAZALI	Email ☐ Call ☐
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Payee 1:	\$S 2,090.00	Name 1: COMFORTDELGRO ENGINEERING PTE LTD	
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Payee 2: (Strike if N.A.)	\$S	Name 2:	
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Payee 3: (Strike if N.A.)	\$S	Name 3:	
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