

15/5/2010

INS. CASE OWNER:

CC 4/AIG1900 8902

LKK:

IDAC:

Surveyor:

KENNETH

DOI:

ASSIGNMENT

28/05/19

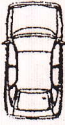
Date / Time:

21/5/19

Registered in Merimen:

21/5/19

Pre-assign / CCU / FTE



Insured Vehicle No.:

STV 7683Z

Claim No.:

67621909V456

Name of Insured:

UM SUAT YEN (LIN XUEYAN)

Policy No.:

1900004543

Insured Tel No.:

HP:

Make / Model:

HUMOR

Excess Sec II :SS

D.O.A.:

15/5/19

Place of Accident:

22N 6005

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

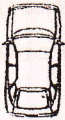
OI GIA REPORT: YES / NO : TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SU 48815



INSRS:

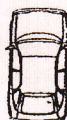
WSP:

Tel:

Liability:

RMKS:

Lim Tan



INSRS:

WSP:

Tel:

Liability:

RMKS:



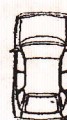
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time		STAGE	DATE / PIC
	SU48815-X		
	STV7683Z-X		
	MANAGED	Non-Reporting ltr (1st):	
	TP LOB IN.	Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	
21/06/19	- MUG REQUIRER, OI RATE-ENDED TP.	After call ltr to OI:	21/06/19 - vic
	- SEND LETTER IN EMAIL TO OI.	Documentation Check List:	Handler Typist
		Notification ltr (if non-pickup)	☐
21/06/19	- SEND 1st OFFER TO TP.	After call ltr to OI:	☒
21/06/19	- TP ACCEPTED OFFER.	Authorisation To Act:	☒
	- ALL DOCS IN ORDER.	Release Voucher:	☒
	- TO CLOSE.	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: L6	SS 2,000.00	(2 days) Reduction: 23 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 21/06/19	Confirm with: RICHARD	Email ☒ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: (w/LOD)	SS 2,140.00		COL RATE-ENDED TP)
Loss of Rental (LOR):	SS 200.00	(2 days) x \$100.00	
Loss of Use (LOU):	SS -	(S x days)	
Loss of Income (LOI):	SS -	(S x days)	
LOR only ☒ LOU only ☐	LOR + LOU ☐ LOR + LO ☐	[Tick only one]	
GIA/LTA Search	SS 7.45		
Medical:	SS -		
Disbursement:	SS -	(e.g. Tow/ Independent)	
Legal Cost	SS -		
Total:	SS 2,347.45	Global Sum \$S: -	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	SS 2,347.45	Name 1: LIM TAN MOTOR PTE LTD	
Payee 2: (Strike if N.A.)	SS -	Name 2:	
Payee 3: (Strike if N.A.)	SS -	Name 3:	