

INS. CASE OWNER:

CC3 / CTI 1900 9691 / Jha39

LKK:

IDAC:

Surveyor:

MAY

DOI:

ASSIGNMENT

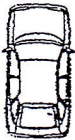
3/15/19

Date / Time:

3/15/19

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SUP5542T

Name of Insured:

Lim Choo Leong

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A:

3/15/19

Claim No.:

SNM190202029/002-TKL

Policy No.:

Make / Model:

Place of Accident:

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

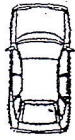
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SHF362D



INSRS:

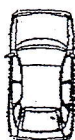
WSP:

Tel:

Liability:

RMKS:

SmeT.m.



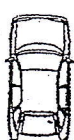
INSRS:

WSP:

Tel:

Liability:

RMKS:



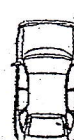
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/Time

SUP5542T - X

SHF362D - call 011 900 1815 / 8803, WA: 231719
- call / HSM 1900 7908 / 60392, WA: 2314118

- TO CHECK WITH OI IF ANY UPDATE FROM TRAFFIC POLICE.

19/6/19

Called OI to inform TP claim. OI disputed, and will provide us with video evidence via email.
Letter Hand copy sent.
- PIR IN. AGAINST OI
- FINANCED

23/06/19

- TP REPORT WHILE FORWARDING TP LOD
- REPORT DONE
- TP LOD IN BY EMAIL

21/11/19

- SEEK WARRANT TO OI

- OI APPROVED WARRANT

11/02/2020

- SEND SET OFFER TO TP

PRELIMINARY ADVICE

Date/Time: 04/06/19

Sent By:

a3

- TP ACCEPTED OFFER

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:

19/06/19 - Jimmy

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: - AGAINST OI

Mandate/Reject Instruction:

LOD

Payment Breakdown Form:

Post-Repair Photos:

Others:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

P/P

\$S 16,317.64

(9

days) Reduction:

67

%

Email

Call

FINAL SETTLEMENT

Date/Time: 11/02/2020

Confirm with

LTC GOK

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

NIL

If NO or B 28, Ass. Lia:

Repair Cost:

\$S 16,317.64

Loss of Rental (LOR):

\$S 1,662.78

(14

days) x \$118.77

Loss of Use (LOU):

\$S

-

(\$ x

days)

Loss of Income (LOI):

\$S

-

(\$ x

days)

LOR only ☒ LOU only ☐LOR + LOU ☐LOR + LOI ☐

[Tick only one]

GIA/LTA Search

\$S 7.00

Medical:

\$S -

Disbursement:

\$S -

Legal Cost

\$S -

(e.g. Tow/ Independent)

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$400.00

Total:

\$S 17,987.42

Global Sum \$S:

17,980.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

\$S 17,980.00

Name 1:

SHRT TAXIS PTE LTD

Payee 2: (Strike if N.A.)

\$S

-

Name 2:

-

Payee 3: (Strike if N.A.)

\$S

-

Name 3:

-

COPY SENT