

15/5/2010

INS. CASE OWNER:

CC

4/III1901 0 384, K 45639

LKK:

IDAC:

Surveyor:

Klaeth

DOI:

18/6/19

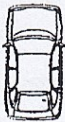
Date / Time:

11/6/19

Registered in Merimen:

11/6/19

Pre-assign / CCU / FTE



Insured Vehicle No.:

SHA 5955L

Name of Insured:

CTB

Insured Tel No.:

HP:

Excess Sec II :\$S

D.O.A.:

8/6/19

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Hua Kian Khoo

Driver Tel No.:

(V/L: YES/ NO)

Claim No.:

Policy No.:

Make / Model:

Place of Accident:

Toyota

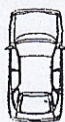
260 Yishun Ave 6 4

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

Insured Liability: %

Final ? Yes / No

SIC 785K



INSRS:

WSP:

Tel:

Liability:

RMKS:

Hui Yang



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:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

\$S

750.00

(2 days)

Reduction:

74

%

Email

Call

FINAL SETTLEMENT

Date/Time:

23/9/2020

Confirm with

B21

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

NIL

If NO or B 28, Ass. Lia:

Repair Cost:

\$S

802.50

Loss of Rental (LOR):

\$S

-

(- days)

Loss of Use (LOU):

\$S

120.00

(\$ 60 x 2 days)

Loss of Income (LOI):

\$S

-

(\$ x days)

LOR only

☐

LOU only

☒

LOR + LOU

☐

LOR + LO

☐

[Tick only one]

GIA/LTA Search

\$S

-

Medical:

\$S

-

Disbursement:

\$S

-

(e.g. Tow/ Independent)

Legal Cost

\$S

-

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$350.00

Total:

\$S

922.50

Global Sum \$S:

920.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

\$S

920.00

Name 1:

Hui Yang Motor Pte Ltd

Payee 2: (Strike if N.A.)

\$S

-

Name 2:

-

Payee 3: (Strike if N.A.)

\$S

-

Name 3:

-