

INS. CASE OWNER:

cc 6, MG 190 10447, ~~XXXX~~

LKK:

IDAC:

Surveyor:

LWP

DOI:

ASSIGNMENT

11/6/19

Aba3

Date / Time :

11/6/19

Registered in Merimen:

12/6/19

Pre-assign / CCU / FTE



Insured Vehicle No. :

Sm69594C

Claim No. :

Name of Insured :

Policy No. :

Insured Tel No. :

HP:

Make / Model :

Excess Sec II :SS

D.O.A :

3/6/19

Place of Accident :

Is driver the owner?

( YES / NO )

Nature of Accident :

If NO, Driver Name / Age :

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

Driver Tel No. :

(V/L: YES / NO )

Insured Liability :

%

Final ? Yes / No

SLX 7962J



INSRS:

WSP:

Tel :

Liability :

RMKS:

Ace Auto



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

SLX 7962J - X;

sm69594C - X

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:

14/04/2021

SETTLED AND CLOSED / FILE IN DRAWER

## PRELIMINARY ADVICE

Date/Time:

Sent By:

## FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

P/P

S\$ 6,068.90

( 4 days)

Reduction: 43.15

%

Email

Call

## FINAL SETTLEMENT

Date/Time:

13/04/2021

Confirm with

SUHAIMI

Email

Call

Final Liability:

%

100

(Agreed / Assessed) BOLA S/N No. :

27

If NO or B 28, Ass. Lia :

Repair Cost:

S\$

6,068.90

Loss of Rental (LOR):

S\$

( days)

Loss of Use (LOU):

S\$

280.00

(\$ 70 x 4 days)

Loss of Income (LOI):

S\$

(\$ x days)

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

S\$

7.45

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent )

Legal Cost

S\$

Total:

S\$

6,356.35

Global Sum S\$:

6,350.00

4)AR FEE : \$2.54 x 2

## FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

6,350.00

Name 1:

ACE AUTO SOLUTION

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:

