

INS. CASE OWNER:

CHIEF HONG

CC6, AG 190 11587, Uha39

LKK:

IDAC:

Surveyor:

MARCUS

DOI:

4/7/19

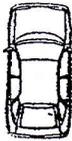
Date / Time:

1/7/19

Registered in Merimen:

1/7/19

Pre-assign / CCU / FTE



Insured Vehicle No. : SLX 1364A

Claim No. : 381376390599

Name of Insured : Wong Khai Yu

Policy No. :

Insured Tel No. : HP:

Make / Model :

Excess Sec II :SS D.O.A : 29/6/2019

Place of Accident :

Is driver the owner? (YES / NO) Nature of Accident :

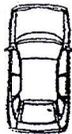
If NO, Driver Name / Age :

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

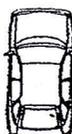
Driver Tel No. : (V/L/YES/NO)

Insured Liability : % Final ? Yes / No

GBJ 2562E



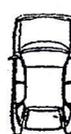
INSRS: WSP: Pastech  
Tel :  
Liability :  
RMKS:



INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:



INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:



INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:

Date/Time		STAGE	DATE / PIC
	GBJ 2562 E SLX 1364A	Non-Reporting ltr (1st): Non-Reporting ltr (2nd): Non-Reporting ltr (Final): Notification ltr (if non-pickup): Call OI: After call ltr to OI:	
04/07/19	MUR REQUIR'D. OI RATE-ENDED TP. SEND LETTER TO OI.	Documentation Check List: Handler Typist	
4/7/19	LETTR sent to OZ	Notification ltr (if non-pickup) <input type="checkbox"/>	
	MUR RATED	After call ltr to OI: <input checked="" type="checkbox"/>	
	ORIGINAL TP LOD IN	Authorisation To Act: <input checked="" type="checkbox"/>	
03/09/19	TYPE REPORT FOR MANDATE APPROVAL	Release Voucher: <input checked="" type="checkbox"/>	
	REPORT DONE	Final Repair Bill: <input checked="" type="checkbox"/>	
30/9/19	SEND MANDATE APPROVAL TO HIG	Car Rental Invoice: <input type="checkbox"/>	
02/10/19	HIG APPROVED MANDATE.	Towing Invoice: <input type="checkbox"/>	
	SEND ACCEPTANCE TO TP.	LTA / GIA: <input checked="" type="checkbox"/>	
	ALL DOCS IN ORDER.	Medical Bill: <input type="checkbox"/>	
	TO CLOSE.	PIR: <input type="checkbox"/>	
		Mandate/Reject Instruction: <input checked="" type="checkbox"/>	
		LOD: <input checked="" type="checkbox"/>	
		Payment Breakdown Form: <input type="checkbox"/>	
		Post-Repair Photos: <input type="checkbox"/>	
		Others: <input type="checkbox"/>	

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: L6 S\$ 7,000.00 (6 days) Reduction: 69 % Email  Call

FINAL SETTLEMENT Date/Time: 02/10/19 Confirm with: JASON Email  Call

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No.: 27 If NO or B 28, Ass. Lia: (OI RATE-ENDED TP)

Repair Cost: (w/gst) S\$ 7,490.00

Loss of Rental (LOR): S\$ - ( days)  
Loss of Use (LOU): S\$ 840.00 (\$ 120 x 7 days)  
Loss of Income (LOI): S\$ - (\$ x days)

LOR only  LOU only  LOR + LOU  LOR + LOI  [Tick only one]

GIA/LTA Search S\$ 2.00  
Medical: S\$ -  
Disbursement: S\$ - (e.g. Tow/ Independent)  
Legal Cost S\$ -

Total: S\$ 8,332.00 Global Sum S\$: -  
1) Claim status: Normal/Reject/Private Settle  
2) Report Format:  
3) Survey fee: \$320.00

FINAL PAYMENT Date/Time: Confirm with: Email  Call

Payee 1: S\$ 8,332.00 Name 1: PASTECH AUTO PTG LTD

Payee 2: (Strike if N.A.) S\$ - Name 2: -

Payee 3: (Strike if N.A.) S\$ - Name 3: -