

15/5/2010

INS. CASE OWNER:

CC 4/EGI1901 1700, Khb3

LKK:
IDAC:

Surveyor:

KENNETH

DOI:

ASSIGNMENT

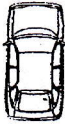
03/07/19

Date / Time:

11/7/19.

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

XD 2351T

Name of Insured :

ENG LAM CONTRACTORS CO PTE

Insured Tel No. :

HP:

Excess Sec II : \$\$

D.O.A :

4/6/19

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age : RAMESH S RINIVASAN.

Driver Tel No. :

(V/L: YES / NO)

Claim No. :

COMCG 19001221/PXJC

Policy No. :

DMCG 19004906.

Make / Model :

ISUZU.

Place of Accident :

PAYA LEBAR EXT TO P15

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

Insured Liability :

%

Final ? Yes / No

SY 74710



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
	SY 74710 - X		
	XD 2351T - X		
12/07/19	MIS ROUTED. MERGING LANE. SEND OFFER TO OI TO NOTIFY TP CLAIM & NO ISSUES.	Non-Reporting ltr (1st):	
		Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	
		After call ltr to OI:	12/07/19 - VIC
		Documentation Check List:	Handler Typist
		Notification ltr (if non-pickup)	☒ ☐
		After call ltr to OI:	☒ ☐
		Authorisation To Act:	☒ ☐
		Release Voucher:	NO PV ☐ ☐
		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: 04/07/19	Sent By: b3	

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: 46	S\$ 1,300.00	(3 days) Reduction: 26 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 16/08/19	Confirm with: RICHARD	Email ☒ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. :	NIL
Repair Cost: (W/GST)	S\$ 1,291.00		
Loss of Rental (LOR):	S\$ -	(days)	
Loss of Use (LOU):	S\$ 270.00 x 3	days)	
Loss of Income (LOI):	S\$ -	(\$ x days)	
LOR only ☐ LOU only ☒	LOR + LOU ☐ LOR + LO ☐	[Tick only one]	
GIA/LTA Search	S\$ 7.45		
Medical:	S\$ -		
Disbursement:	S\$ -	(e.g. Tow/ Independent)	
Legal Cost	S\$ -		
Total:	S\$ 1,668.45	Global Sum S\$: -	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S\$ 1,668.45	Name 1: LIM TAN MOTOR PTB LTD	
Payee 2: (Strike if N.A.)	S\$ -	Name 2: -	
Payee 3: (Strike if N.A.)	S\$ -	Name 3: -	