

15/5/2010

INS. CASE OWNER:

CC 4/AIG1901 2002, K663

LKK:

IDAC:

Surveyor:

KENNETH

DOI:

ASSIGNMENT

15/07/19

Date / Time :

8/7/19.

Registered in Merimen:

8/7/19.

Pre-assign / CCU / FTE



Insured Vehicle No. :

SKT 2970X

Claim No. :

580898061159

Name of Insured :

u KYI UN.

Policy No. :

Insured Tel No. :

HP:

V7/19.

Make / Model :

Excess Sec II :SS

D.O.A :

Place of Accident :

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

KHI UN.

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

Driver Tel No. :

(V/L: YES / NO)

Insured Liability :

%

Final ? Yes / No



INSRS:

WSP:

Tel :

Liability :

RMKS:

cheng
HOE

INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time	STAGE	DATE / PIC
14/08/19	Non-Reporting ltr (1st):	
	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
	Call OI:	
	After call ltr to OI:	14/08/19-uic
	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:	Confirm by:
FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: L/S	SS 2,100.00 (4 days)	Reduction: 26.59 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 28/10/2020	Confirm with: JUNE	Email ☒ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 22	If NO or B 28, Ass. Lia :
Repair Cost: (w/gst)	SS 2,247.00		(OLD HIT PATCHED TP)
Loss of Rental (LOR):	SS 520.00 (4 days) x \$ 130.00		
Loss of Use (LOU):	SS - (S x days)		
Loss of Income (LOI):	SS - (S x days)		
LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LO ☐ [Tick only one]			
GIA/LTA Search	SS 8.00		
Medical:	SS -		
Disbursement:	SS - (e.g. Tow/ Independent)		
Legal Cost	SS -		
Total:	SS 2,715.00	Global Sum SS: 2,700.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	SS 2,700.00	Name 1: CHENG HOE MOTOR PTE LTD	
Payee 2: (Strike if N.A.)	SS -	Name 2: -	
Payee 3: (Strike if N.A.)	SS -	Name 3: -	

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

TP

3) Survey fee:

\$ 320.00