

INS. CASE OWNER:

CC 3 / CT 19012130 / Kea3

LKK:
IDAC:

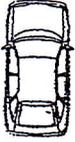
Surveyor: Kenneth

ASSIGNMENT
DOI: 8/17/19

Date / Time: 8/17/19

Pre-assign / CCU / FTE

Registered in Merimen:



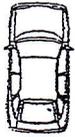
Insured Vehicle No. : SKK 7099G
Name of Insured : MS LIMO 66
Insured Tel No. : HP:
Excess Sec II :SS D.O.A: 3/7/19

Claim No. :
Policy No. :
Make / Model :
Place of Accident :

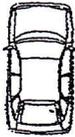
Is driver the owner? (-YES / NO) Nature of Accident :

If NO, Driver Name / Age :
Driver Tel No. : (VL: YES / NO)
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO
Insured Liability : % Final ? Yes / No

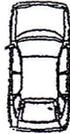
SHC 577467



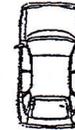
INSRS:
WSP: Trans-Cab
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Table with columns: Date/Time, STAGE, DATE / PIC. Includes handwritten notes like 'SHC 577467 CCU/ASM 19011919/ab3; D.O.A: 3/7/19' and 'REJECT ON VIDEO SAME (CY: ASHER: JOP) VIDEO SHOW TP CHANGED LANE AND HIT O/D'. Includes a 'Reject Case' stamp with 'Approved by: [Signature]' and 'Date: 12-11-20'.

Table with sections: PRELIMINARY ADVICE, FINALIZATION, FINAL SETTLEMENT, FINAL PAYMENT. Includes fields for Repair Cost (\$3,100.00), Loss of Rental (LOR), Loss of Use (LOU), Loss of Income (LOI), and Total/Global Sum (\$\$).