

15/5/2010

INS. CASE OWNER:

LEE MING YAO

CC 4/AIG1901

2279, KHH

LKK:

IDAC:

Surveyor:

Kenneth

DOI:

ASSIGNMENT

11/8/19

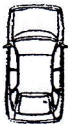
Date / Time:

10/8/19

Registered in Merimen:

11/7/19

Pre-assign / CCU / FTE



Insured Vehicle No.:

SLZ 66420

Claim No.:

7A1972720366

Name of Insured:

BIS MOTORING PTE LTD

Policy No.:

Insured Tel No.:

HP:

Make / Model:

Excess Sec II :\$S

D.O.A.:

6/3/19

Place of Accident:

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L YES / NO)

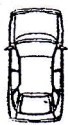
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability: % Final ? Yes / No

SPB 80780

SLZ 66420

SPB 9191B

INSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP: 4B
Tel:
Liability:
RMKS: TPINSRS:
WSP:
Tel:
Liability:
RMKS:

Date/ Time	STAGE	DATE / PIC
	Non-Reporting ltr (1st):	
	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
16/07/19	Call OI:	
	After call ltr to OI:	16/07/19 - vic
	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:		
FINALIZATION Date/Time: Confirm with: Confirm by:		
Repair Cost: 49	\$S 8,200.00 (7 days) Reduction: 47 %	Email ☐ Call ☐
FINAL SETTLEMENT Date/Time: Confirm with: 887886 Email ☐ Call ☐		
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No.:	28
Repair Cost:	\$S 8,200.00	If NO or B 28, Ass. Lia: 07.
Loss of Rental (LOR):	\$S (days)	(3 VEH. C.C., OLD 2ND)
Loss of Use (LOU):	\$S 500.00 x 7 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 -	1) Claim status: Normal/Reject/Private Settle
Disbursement:	\$S - (e.g. Tow/ Independent)	2) Report Format:
Legal Cost	\$S -	3) Survey fee: 4320.00
Total:	\$S 8,767.45 Global Sum \$S: -	
FINAL PAYMENT Date/Time: Confirm with: Email ☐ Call ☐		
Payee 1:	\$S 8,767.45 Name 1:	LIM YEW BOO SPRAY PAINT CO.
Payee 2: (Strike if N.A.)	\$S - Name 2:	-
Payee 3: (Strike if N.A.)	\$S - Name 3:	-