

INS. CASE OWNER

BONNIE

CC 6/11/19 190/2379, UB0390

LKR
EMC

Surveyor:

M. APONS

ASSIGNMENT

DOI

12/1/19

Date / Time

12/1/19

Registered in Movement

12/1/19

Pre-assign / CCU / FTE



Insured Vehicle No.

SJA 5779E

Name of Insured

Dng Chow Keong

Insured Tel No.

HP

Claims No.

133472203506

Policy No.

Make / Model

Place of Accident

Excess Sec II (SS)

D.O.A.

11/1/2019

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

SLZ 7290D



INSRS:

WSP:

Tel:

Liability:

RMKS:

Fujitsu



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

SLZ 7290D: X

SJA 5779E: NA / USB D 000226 / 01: D.O.A: 5/1/12

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

After call ltr to OI: 20/08/19 - JIC

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:

20/08/19

MUR REVIEWED. OI RATE - ENDED TP.
SEND OFFER TO BUREAU TO OI TO ADJUD
TP CLAIM & NOO REVIEW.

PINALIZED

ORIGINAL TP LOB IN

06/11/19

TYPE REPORT FOR MANDATE APPROVAL
REPORT DONE

07/12/19

GIVE MANDATE TO AG

06/03/2020

AG APPROVED MANDATE.

09/03/2020

SEND DOT OFFER TO TP

21/08/2020

settled & closed (file in drawer).

PRELIMINARY ADVICE

Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

P/P

SS

11,940.42

(7 days)

Reduction:

55

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with:

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

27

If NO or B 28, Ass. Lia:

Repair Cost:

(w/ GST)

SS

12,776.25

COI RATE - ENDED TP)

Loss of Rental (LOR):

SS

325.00

(6.5 days)

x \$50.00

Loss of Use (LOU):

SS

-

1

x days

Loss of Income (LOI):

SS

-

1

x days

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

SS

200

Medical:

SS

-

Disbursement:

SS

-

(e.g. Tow/ Independent)

Legal Cost

SS

-

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

TP

Total:

SS

13,103.25

Global Sum SS:

13,100.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

SS

13,100.00

Name 1:

FASTECH AUTO PTE LTD

Payee 2: (Strike if N.A.)

SS

-

Name 2:

Payee 3: (Strike if N.A.)

SS

-

Name 3: