

INS CASE OWNER:

CC 6, MG 190 13375, ABA39.

LKK:
IDAC:

Surveyor:

Lup

DOI:

ASSIGNMENT

29/1/19

Date / Time:

29/1/19

Registered in Merimen:

30/3/19

Pre-assign / CCU / FTE



Insured Vehicle No.:

G36 7536P

Claim No.:

00246190596

Name of Insured:

S'ON KITCHEN EQUIPMENT P/L

Policy No.:

Insured Tel No.:

HP:

Make / Model:

Excess Sec II :SS

D.O.A:

26/03/2019

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

SJUNY



INSRS:

WSP:

Tel:

Liability:

RMKS:

Keshary



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

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):	
	Call OI:	
	After call ltr to OI:	19/08/19 - VC
	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: Email ☐ Call ☐		
Repair Cost: US	SS 3,000.00 (6 days) Reduction: 83 %	Email ☒ Call ☐
FINAL SETTLEMENT Date/Time: 29/04/2020 Confirm with: PK chen		
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No.:	27
Repair Cost: (w/655)	SS 3,210.00	If NO or B 28, Ass. Lia:
Loss of Rental (LOR):	SS (days)	(LOD RATE - ENDED TP)
Loss of Use (LOU):	SS 420.00 (570 x 6 days)	
Loss of Income (LOI):	SS (x days)	
LOR only ☐ LOU only ☐	☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]	
GIA/LTA Search	SS -	1) Claim status: (Normal) Reject/Private Settle
Medical:	SS - (e.g. Tow/Independent)	2) Report Format: TP
Disbursement:	SS -	3) Survey fee: \$ 320.00
Legal Cost	SS -	
Total:	SS 3,630.00 Global Sum SS:	Email ☐ Call ☐
FINAL PAYMENT Date/Time: Confirm with: LEE CHONG AUTO PTE LTD		
Payee 1:	SS 3,630.00 Name 1:	
Payee 2: (Strike if N.A.)	SS - Name 2:	
Payee 3: (Strike if N.A.)	SS - Name 3:	