

INS. CASE OWNER:

LOH CHUE HENG

GC 3, A/G 190

13830,

A has 92

LKK:

IDAC:

Surveyor:

WMP

DOI:

ASSIGNMENT

8/8/19

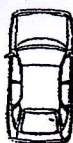
Date / Time:

7/8/19

Registered in Merimen:

7/8/19

Pre-assign / CCU / FTE



Insured Vehicle No.:

SMJ 6814Y

Name of Insured:

ZHENG TIAN YUAN

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A:

6/11/2019

Is driver the owner?

(YES / NO)

Nature of Accident:

Claim No.:

377743524256

Policy No.:

Make / Model:

Place of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

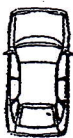
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SLX 8192H



INSRS:

WSP:

Tel:

Liability:

RMKS:

Premium



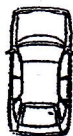
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

SLX 8192H. X ;

SMJ 6814Y. X

STAGE

DATE / PIC

13/08/19

Plus reviewed. OI was making a return.
OI reported TP changed case. Send letter to OI to notify TP claim in NCD books.
Email liability unclear
TP video footage in. V/UIC/SLX 8192H.
TP within LMP, OI return

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

After call ltr to OI: 13/08/19 - 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:

27/11/19

02/01/20

TP report for mandate approval
AG approved mandate. Send 1st offer to TP. TP reported LOR @ \$120/day. Insisted on \$150/day.
Revoke mandate approval. AG approved.
Send acceptance email to TP

Payment Breakdown Form:

Post-Repair Photos:

Others:

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

PLP

S\$

19,734.00

15

days)

Reduction:

30

%

Email

Call

FINAL SETTLEMENT

Date/Time:

10/01/20

Confirm with:

NABIA

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

NIL

If NO or B 28, Ass. Lia:

Repair Cost:

W/LOR

S\$

21,115.47

Loss of Rental (LOR):

S\$

2,247.00

(14

days)

x \$150.00

Loss of Use (LOU):

S\$

-

(\$

x

days)

Loss of Income (LOI):

S\$

-

(\$

x

days)

LOR only ☒ LOU only ☐LOR + LOU ☐LOR + LOI ☐

[Tick only one]

GIA/LTA Search

S\$

2.00

Medical:

S\$

-

Disbursement:

S\$

-

(e.g. Tow/ Independent)

Legal Cost

S\$

-

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

\$320.00

Total:

S\$

23,364.47

Global Sum S\$:

-

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

23,364.47

Name 1:

PREMIUM AUTOMOBILES PTE LTD

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

-

Payee 3: (Strike if N.A.)

S\$

-

Name 3:

-