

Express (due on 11/10/19)

To Close within 3 WDs

Sent : 09/11/19

15/5/2010

INS. CASE OWNER:

LOH CHEE HENG

CC 6 /AIG1901 4036; E

Surveyor:

STOVE

DOI:

ASSIGNMENT

20/08/19

Date / Time :

13/8/19

Registered in Merimen:

13/8/19

Pre-assign / CCU / FTE



Insured Vehicle No. :

GBC 89460

Claim No. :

114701874456

Name of Insured :

SELEBIE SPAREPARTS PTE

Policy No. :

2001764418-05

Insured Tel No. :

HP:

Make / Model :

TOMOTA

Excess Sec II :\$

D.O.A :

11/8/19

Place of Accident :

SEKING RD 4

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

LAN YET WAI

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

Driver Tel No. :

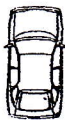
(V/L: YES / NO)

Insured Liability :

%

Final ? Yes / No

SGW 2011B



INSRS:

WSP:

Tel :

Liability :

RMKS:

performance



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time		STAGE	DATE / PIC
	SGW 2011B - X		
	GBC 89460 - X		
	TP VIDEO IN - V/LIC/SGW 2011B		
	UPLOADED IN MERIMEN		
15/08/19	FILE REQUESTED. OLD REQUESTED.		
	SEND LETTER & EMAIL TO OI TO		
	NOTIFY TP CLAIM & NOO REQUEST.		
	EMAIL LIABILITY CLERK		
	MINUTED		
	ORIGINAL TP LOD IN		
25/09/19	TYPE REPORT FOR MANDATE APPROVAL		
	REPORT DONE		
08/10/19	SEK MANDATE APPROVAL TO AIG		
08/10/19	AIG APPROVED MANDATE		
09/11/19	SEND ACCEPTANCE EMAIL TO TP		
	ALL DONE IN OFFICE		
	TO CLOSE		
PRELIMINARY ADVICE	Date/Time:	Sent By:	
FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost:	\$12,564.80	(8 days) Reduction:	19 %
FINAL SETTLEMENT	Date/Time: 09/11/19	Confirm with: CAROLINE	Email ☒ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. :	2A
Repair Cost: (w/gst)	\$13,444.34		
Loss of Rental (LOR):	\$ (days)		
Loss of Use (LOU):	\$400.00 (\$60 x 8 days)		
Loss of Income (LOI):	\$ (\$ x days)		
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LO ☐			
GIA/LTA Search	\$2.00		
Medical:	\$-		
Disbursement:	\$-	(e.g. Tow/ Independent)	
Legal Cost	\$-		
Total:	\$13,926.34	Global Sum \$:	-
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	\$13,926.34	Name 1:	PERFORMANCE MOTORS LIMITED
Payee 2: (Strike if N.A.)	\$-	Name 2:	-
Payee 3: (Strike if N.A.)	\$-	Name 3:	-

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

After call ltr to OI: 15/08/19 - 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: