

INS. CASE OWNER: MingYao.Lee

CC4/AIG19015688/Kba3

LKK:  
IDAC:

Surveyor: KENNETH DOI: 04/09/2019

Date / Time : 3/9/19

Registered in Merimen: 4/9/19

Pre-assign / CCU / FTE

Insured Vehicle No. : SKC 2977Y  
Name of Insured : TONG BEE CONSTRUCTION PTE LTD

Claim No. : 8540572397SG

Policy No. : 1700039955

Insured Tel No. : HP: D.O.A : 31/08/2019 16:00

Make / Model : MITSUBISHI LANCER-1.5 (A)  
Place of Accident : INTERSECTION BETWEEN YISHUN AVE 1 & SEMBAWANG ROADExcess Sec II :S\$ Nature of Accident :  
Is driver the owner? ( YES / NO )

If NO, Driver Name / Age : GOH CHANG HEE

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

Driver Tel No. : +65-96758058 (V/L: YES / NO )

Insured Liability : % Final ? Yes / No

SLR 6372A

INSRS:  
WSP: CHENG HOE  
Tel :  
Liability :  
RMKS:INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:

Date/ Time		STAGE	DATE / PIC
	SKC 2977Y - NBA/AIG14014280/Y; DOA:28/7/14	Non-Reporting ltr (1st):	
	SLR 6372A - NA/TMI19013837/h4; DOA: 3/8/19	Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	
		After call ltr to OI:	
		Documentation Check List: Handler Typist	
		Notification ltr (if non-pickup)	<input checked="" type="checkbox"/>
		After call ltr to OI:	<input checked="" type="checkbox"/>
		Authorisation To Act:	<input checked="" type="checkbox"/>
		Release Voucher:	<input checked="" type="checkbox"/>
		Final Repair Bill:	<input checked="" type="checkbox"/>
		Car Rental Invoice:	<input type="checkbox"/>
		Towing Invoice	<input type="checkbox"/>
		LTA / GIA :	<input checked="" type="checkbox"/>
05/08/2021	SETTLED AND CLOSED / FILE IN DRAWER	Medical Bill:	<input type="checkbox"/>
		PIR:	<input type="checkbox"/>
		Mandate/Reject Instruction:	<input checked="" type="checkbox"/>
		LOD	<input checked="" type="checkbox"/>
		Payment Breakdown Form:	<input type="checkbox"/>
		Post-Repair Photos:	<input type="checkbox"/>
		Others:	<input type="checkbox"/>

<b>PRELIMINARY ADVICE</b> Date/Time:		Sent By:	
<b>FINALIZATION</b> Date/Time:		Confirm with:	
Repair Cost: P/P	S\$ 3,581.40 ( 6 days) Reduction: 19.57 %	Confirm by: Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>	
<b>FINAL SETTLEMENT</b> Date/Time: 03/08/2021 Confirm with: JUNE		Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost: (W/GST)	S\$ 3,832.10		
Loss of Rental (LOR):	S\$ ( days)		
Loss of Use (LOU):	S\$ 360.00 (\$ 60 x 6 days)		
Loss of Income (LOI):	S\$ (\$ x days)		
LOR only <input type="checkbox"/> LOU only <input checked="" type="checkbox"/>	LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/> [Tick only one]		
GIA/LTA Search	S\$ 8.00		
Medical:	S\$	1) Claim status: Normal/Reject/Private Settle	
Disbursement:	S\$ (e.g. Tow/ Independent )	2) Report Format: TP	
Legal Cost	S\$	3) Survey fee: \$320.00	
<b>Total:</b>	S\$ 4,200.10	Global Sum S\$: 4,100.00	
<b>FINAL PAYMENT</b> Date/Time:		Confirm with: Email <input type="checkbox"/> Call <input type="checkbox"/>	
Payee 1:	S\$ 4,100.00	Name 1:	CHENG HOE MOTOR PTE LTD
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	