

15/5/2010

INS. CASE OWNER:

SAUNA

CC 7 /AIG1901 6703, Fwhb.

LKK:

IDAC:

Surveyor:

STEVE

DOI:

ASSIGNMENT

17/9/19

Date / Time :

17/9/19

Registered in Merimen:

16/1/19

Pre-assign / CCU / FTE



Insured Vehicle No. :

SKW 5790K.

Claim No. :

86562842349

Name of Insured :

NEE KIM NEO.

Policy No. :

200626189-03.

Insured Tel No. :

HP:

Make / Model :

LEXUS.

Excess Sec II :\$\$

D.O.A. :

12/1/19

Place of Accident :

TRAFFIC JUNE 12/19/19 BANG KED.

Is driver the owner? (YES / NO)

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

HEW JIA HENG 40 YR.

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

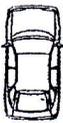
Driver Tel No. :

(V/L: YES / NO)

Insured Liability : %

Final ? Yes / No

SHB 9917.



INSRS:
WSP:
Tel :
Liability :
RMKS:

SMRT.



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/Time	STAGE	DATE / PIC
20/9/19	Non-Reporting ltr (1st): Non-Reporting ltr (2nd): Non-Reporting ltr (Final): Notification ltr (if non-pickup): Call OI: After call ltr to OI:	20/9/19 - vic
20/9/19	Documentation Check List: Handler Typist	
21/10/19	Notification ltr (if non-pickup):	
22/10/19	After call ltr to OI:	
22/10/19	Authorisation To Act:	
22/10/19	Release Voucher:	
22/10/19	Final Repair Bill:	
22/10/19	Car Rental Invoice:	
22/10/19	Towing Invoice:	
22/10/19	LTA / GIA :	
22/10/19	Medical Bill:	
22/10/19	PIR:	
22/10/19	Mandate/Reject Instruction:	
22/10/19	LOD:	
22/10/19	Payment Breakdown Form:	
22/10/19	Post-Repair Photos:	
22/10/19	Others:	

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: P/P \$2,188.86 (3 days) Reduction: 70 % Email Call

FINAL SETTLEMENT Date/Time: 01/11/19 Confirm with: NEE GSK Email Call

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27 If NO or B 28, Ass. Lia : COID RATE - ENDED TP)

Repair Cost: \$2,188.86

Loss of Rental (LOR): \$580.50 (5 days) x \$116.10

Loss of Use (LOU): \$ - (\$ x days)

Loss of Income (LOI): \$100.00 (\$80 x 5 days) - NOA

LOR only LOU only LOR + LOU LOR + LOI [Tick only one]

GIA/LTA Search \$7.00

Medical: \$ - 1) Claim status: Normal/Reject/Private Settle

Disbursement: \$ - (e.g. Tow/ Independent) 2) Report Format:

Legal Cost \$ - 3) Survey fee: \$310.00

Total: \$3,176.36 Global Sum \$: 3,170.00

FINAL PAYMENT Date/Time: Confirm with: Email Call

Payee 1: \$3,170.00 Name 1: SMRT TAXI PTE LTD