15/5/2010

Eba3 [redacted]

INS. CASE OWNER: CC 6 /AIG1901 6731 / | LKK: IDAC:

Surveyor: STEVE | ASSIGNMENT DOI: 26/09/19 | Date / Time : 27/9/19. Registered in Merimen: 27/9/19

Pre-assign / CCU / FTE

Insured Vehicle No. : SLS 4987J. | Claim No. : 1466167754

Name of Insured : POON LEE SOON GERRY. | Policy No. : 1700052930.

Insured Tel No. : HP: | Make / Model : KIA

Excess Sec II :S$ D.O.A : 16/9/19. | Place of Accident : 168A BISHAN ST 24 UP

Is driver the owner? (YES / NO) | Nature of Accident :

If NO, Driver Name / Age : | OI GIA REPORT: (YES) / NO ; TP GIA REPORT: (YES) / NO

Driver Tel No. : (V/L: (YES) / NO) | Insured Liability : % Final ? Yes / No

SKW 6629X → → →

INSRS: WSP: Tel : Liability : RMKS: HUA HONG.

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SKW 6629X - A SLS 4987J - A
30/09/19	- PIC REVIEWED. OI HIT PARKED TP. TP VIDEO IN. UPLOADED IN WORKFLOW. SEND LETTER & EMAIL TO OI TO NOTIFY TP CLAIM & ACD ISSUES. - EMAIL CAPABILITY CLEAR - FINALISED
30/6/2020.	Fb -7 report.
13/8/2020.	settled & closed (All doc updated in Vtas)

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:	30/09/19 - 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 / (SLA):	✓	
Medical Bill:		
PIR:		
Mandate/Reject Instruction:	✓	
LOD	✓	
Payment Breakdown Form:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE	Date/Time:		Sent By:	
FINALIZATION	Date/Time:		Confirm with:	Confirm by:
Repair Cost: LS	S$ 3,900.00	(4 days)	Reduction: 59 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 13/08/2020		Confirm with JERLEEN	Email ✓ Cal ☐
Final Liability:	% 100	(Agreed / Assessed)	BOLA S/N No. : 22	If NO or B 28, Ass. Lia :
Repair Cost: (w/gst)	S$ 4,173.00			COI HIT PARKED TP
Loss of Rental (LOR): (w/gst)	S$ 535.00	(5 days)	x $100.00	
Loss of Use (LOU):	S$ —	($ x days)		
Loss of Income (LOI):	S$ —	($ x days)		
LOR only ✓ LOU only ☐	LOR + LOU ☐	LOR + LO ☐	[Tick only one]	
GL/LTA Search	S$ 2.00			
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: $320.00
Total:	S$ 4,710.00	**Global Sum S$:**	—	
FINAL PAYMENT	Date/Time:		Confirm with:	Email ☐ Cal ☐
Payee 1:	S$ 4,710.00	Name 1:	HUA HONG PTE LTD	
Payee 2: (Strike if N.A.)	S$ —	Name 2:	—	
Payee 3: (Strike if N.A.)	S$ —	Name 3:	—	