

15/5/2010

INS. CASE OWNER:

CC 4 / III 1901 7165 /

s3

LKK:

IDAC:

Surveyor:

Jamilah

DOI:

70/1/1/1

Date / Time:

21/1/11

Registered in Merimen:

30/1/11

Pre-assign / CCU / FTE



Insured Vehicle No.:

SHB 4355U

Claim No.:

Name of Insured:

Policy No.:

Insured Tel No.:

HP:

Make / Model:

Excess Sec II :SS

D.O.A:

21/1/11

Place of Accident:

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Driver Tel No.:

(VL: YES / NO)

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

Insured Liability: %

Final ? Yes / No

SHB 4355U

SLG 7887H

SHF 7308

INSRS:
WSP:
Tel:
Liability:
RMKS:

61

INSRS:
WSP:
Tel:
Liability:
RMKS:Hitachi
TPINSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:

Date/ Time

SLG 7887H - X

SHB 4355U - X

19/08/2020

Pls refer to VIEWS for details.

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:

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:

PRELIMINARY ADVICE

Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Repair Cost: P/P

S\$ 21,300.00

(14 days)

Reduction: 41 %

Confirm by:

Email

Call

FINAL SETTLEMENT

Date/Time: 19/08/2020

Confirm with

Jamilah

Email

Call

Final Liability:

%

100

(Agreed / Assessed) BOLA S/N No. : 28

If NO or B 28, Ass. Lia :

100%

Repair Cost: w/GST

S\$ 22,791.00

Loss of Rental (LOR) w/GST

S\$ 2,247.00

(14 days)

x \$150.00

Loss of Use (LOU):

S\$

(S x days)

Loss of Income (LOI):

S\$

(S x days)

LOR only

LOU only

LOR + LOU

LOR + LO

[Tick only one]

GIA/LTA Search

S\$

7.45

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

Total:

S\$ 25,045.45

Global Sum S\$:

25,000.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

25,000.00

Name 1:

Hitachi Capital Asia Pacific Pte. Ltd.

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3: