

INS. CASE OWNER/LOAN CAME FROM

CC 4 / AIG 1901 8513

Bba3q2

1000

1000

Surveyor:

MR. LIA

DOI:

ASSIGNMENT

21/10/19

Date / Time:

21/10/19

Registered in Marlow:

21/10/19

Pre-assign / CCU / FTR



Insured Vehicle No:

SLA 31743.

Name of Insured:

H. C. W. W. W.

Insured Tel No:

HP:

Excess Sec II (S):

D.O.A:

01/10/19

Is driver the owner?

(YES / NO)

Nature of Accident:

Claim No:

AG2000050956

Policy No:

21/10/19

Make / Model:

Ford

Place of Accident:

134 B. B. B. B. B. B. B.

If NO, Driver Name / Age:

Driver Tel No:

(VA: YES / NO)

OICIA REPORT: YES / NO ; TP CIA REPORT: YES / NO

Insured Liability:

%

Final? Yes / No

Smp 387111



INSRS:

WSP:

Tel:

Liability:

RMKS:

Team
Autopro

INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time	STAGE	DATE / PIC
21/10/19	Non-Reporting Itr (1st):	
	Non-Reporting Itr (2nd):	
	Non-Reporting Itr (Final):	
	Notification Itr (if non-pickup):	
	Call OI:	
	After call Itr to OI:	01/10/19
	Documentation Check List:	Handler
	Notification Itr (if non-pickup)	☒
	After call Itr to OI:	☒
	Authorisation To Act:	☒
	Release Voucher:	☒
	Final Repair Bill:	☒
	Car Rental Invoice:	☒
	Towing Invoice:	☒
	UTA (GIL):	☒
	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:

S\$

(days) Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with:

Email

Call

Final Liability:

%

100

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

NIL

If NO or R 28, Ave 1 is:

Repair Cost:

S\$

2,300.00

Loss of Rental (LOR) (w/gp):

S\$

684.00

(4 days) x

\$160.00

Loss of Use (LOU):

S\$

100.00

(\$ 100 x 1 days)

Loss of Income (LOI):

S\$

-

(\$ x days)

LOR only

LOU only

LOR + LOU

LOR + LO

(Tick only one)

GIL/UTA Search

S\$

29.00

Medical:

S\$

-

Disbursement:

S\$

-

(e.g. Tow/ Independent)

Legal Cost

S\$

-

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

TP

3) Survey fee:

\$320.00

Total:

S\$

2,113.80

Global Sum S\$:

3,100.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

3,100.00

Name 1:

TEAM AUTOPRO PTE LTD

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

-

Payee 3: (Strike if N.A.)

S\$

-

Name 3:

-