

INS. CASE OWNER:

SHERINI

CC4/III19018534/Kga3

LKK:

IDAC:

Surveyor:

KENNETH

DOI: 21/10/2019

Date / Time : 21/10/2019

Registered in Merimen: 21/10/2019

Pre-assign / CCU / FTE

	Insured Vehicle No. :	SH 7732H	Claim No. :	
	Name of Insured :	COMFORT TRANSPORTATION PTE LTD	Policy No. :	MCOM0015
	Insured Tel No. :	HP: _____	Make / Model :	HYUNDAI I40
	Excess Sec II :S\$	D.O.A : 16/10/2019 19:15	Place of Accident :	PENJURU LANE X PENJURU ROAD
Is driver the owner? (YES / NO) Nature of Accident : _____				
If NO, Driver Name / Age : LEE KWANG JOO			OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO	
Driver Tel No. : +65-90081693 (V/L: YES / NO)			Insured Liability : % Final ? Yes / No	

PC 2590U

	INSRS: WSP: COMPLETE VMS Tel : Liability : RMKS:		INSRS: WSP: Tel : Liability : RMKS:		INSRS: WSP: Tel : Liability : RMKS:		INSRS: WSP: Tel : Liability : RMKS:
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Date/ Time	STAGE	DATE / PIC
PC 2590U - NBA/INC18017628/Y; DOA: 27/9/18	Non-Reporting ltr (1st):	
SH 7732H - CS/III17005866/T1rbm2 ; DOA: 22/03/17	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:	☐
PRELIMINARY ADVICE Date/Time:	Sent By:	Post-Repair Photos: ☒ ☐
		Others: ☒ ☐
FINALIZATION Date/Time:	Confirm with:	Confirm by: KSC
Repair Cost: L/S S\$ 6500.00 (5 days) Reduction: 3965.69 % 38		Email ☐ Call ☐
FINAL SETTLEMENT Date/Time: 20/01/2020 Confirm with LILY		Email ☒ Call ☐
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 8a		If NO or B 28, Ass. Lia :
Repair Cost: (W/GST) S\$ 6955.00		
Loss of Rental (LOR): S\$ 1200.00 (8 days) x \$150		
Loss of Use (LOU): S\$ (\$ x days)		
Loss of Income (LOI): S\$ (\$ x days)		
LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search S\$ 36.45		
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: \$500.00
Total: S\$ 8191.45	Global Sum S\$: 8190.00	
FINAL PAYMENT Date/Time:	Confirm with:	Email ☒ Call ☐
Payee 1: S\$ 8190.00	Name 1: COMPLETE VMS PTE LTD	
Payee 2: (Strike if N.A.) S\$	Name 2:	
Payee 3: (Strike if N.A.) S\$	Name 3:	