

15/5/2010

INS. CASE OWNER:

CHOW HENG

CC 4/AIG1902

1216

R21663

LKK:

IDAC:

Surveyor:

PNSU

DOI:

ASSIGNMENT

7/11/19

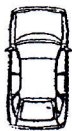
Date / Time :

2/11/19

Registered in Merimen:

2/11/19

Pre-assign / CCU / FTE



Insured Vehicle No. :

SFN 132H

Claim No. :

2A10743235 0G

Name of Insured :

TAN AI LING

Policy No. :

Insured Tel No. :

HP:

Make / Model :

Excess Sec II :\$

D.O.A :

70/11/19

Place of Accident :

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

OI GIA REPORT: YES / NO

TP GIA REPORT: YES / NO

Insured Liability :

%

Final ? Yes / No

XD 8401 T



INSRS:

WSP:

Tel :

Liability :

RMKS:

complete VMS



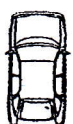
INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

XD 8401 T

SFN 132H

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:

11/12/19 - 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/GIA :

Medical Bill:

PIR:

Mandate/Reject Instruction:

LOD

Payment Breakdown Form:

Post-Repair Photos:

Others: TMA DOCS

11/12/19

- FILE REVIEWED. OI RATE - ENDED TP.

SEND LETTER 4 EMAIL TO OI TO

NOTIFY TP CLAIM 4 NCB ISSUES.

- PINKETED

- TP LOD IN BY EMAIL

12/02/2020

- TYPE REPORT FOR MANDATE APPROVAL

- REPORT DONE

13/02/2020

- SEEK MANDATE TO AIG BY EMAIL/MERIMEN

09/03/2020

- AIG APPROVED MANDATE

- SEND 1ST OFFER TO TP

10/03/2020

- TP ACCEPTED OFFER

- ALL DOCS IN ORDER. TO CLOSE

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

P/P

S\$

43,000.00

3

days) Reduction:

32

%

Email

Call

FINAL SETTLEMENT

Date/Time:

10/03/2020

Confirm with

LH

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No. :

27

If NO or B 28, Ass. Lia :

Repair Cost:

(w/65t)

S\$

46,010.00

Loss of Rental (LOR):

S\$

-

( days)

Loss of Use (LOU):

S\$

540.00

180 x 3

days)

Loss of Income (LOI):

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\$

-

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

4340.00

Total:

S\$

46,557.45

Global Sum S\$:

46,500.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

46,500.00

Name 1:

COMPLETE VMS PTE LTD

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

Payee 3: (Strike if N.A.)

S\$

-

Name 3: