

15/3/2010

INS. CASE OWNER:

CC 4/111 2000 0111

1 R1 ps3

LKK:

IDAC:

Surveyor:

Rasul

DOI:

2/1/2020

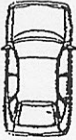
Date / Time:

2/1/2020

Registered in Merimen:

3/1/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : 6BJ 5799U

Claim No. :

Name of Insured : Pan Pacific Van & Truck Leasing Pte Ltd

Policy No. :

Insured Tel No. : HP:

Make / Model :

Excess Sec II : SS

D.O.A : 26/12/19

Place of Accident :

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. :

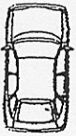
(V/L YES / NO)

Insured Liability :

%

Final ? Yes / No

SLA 2487J



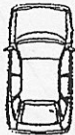
INSRS:

WSP: C & C

Tel :

Liability :

RMKS:



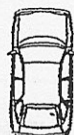
INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

SLA 2487J : X ; 6BJ 5799U : X

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:

Confirm by:

Repair Cost: PIP S\$ 17958.00 (9 days) Reduction: 37 %

Email ☐ Call ☐

FINAL SETTLEMENT

Date/Time: 17/1/2020

Confirm with Lamy

Email ☐ Call ☐

Final Liability: % (Agreed / Assessed) BOLA S/N No. : 27

If NO or B 28, Ass. Lia :

Repair Cost: W/HST S\$ 19215.06

Loss of Rental (LOR): W/HST S\$ 1284.00 (12 days) XH 100.00

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\$ 7.45

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: \$ 600.00

Total: S\$ 20506.51

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☒ Call ☐

Payee 1: S\$ 20506.51

Name 1: Cycle & Carriage France Pte Ltd

Payee 2: (Strike if N.A.) S\$

Name 2:

Payee 3: (Strike if N.A.) S\$

Name 3: