

INS. CASE OWNER:

CC 6 / ALG 2000 0172 / ALK³

LKK:

IDAC:

ASSIGNMENT

Surveyor:

Adrian

DOI:

3/1/2020

Date / Time:

3/1/2020

Registered in Merimen:

3/1/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SMP 4559R

Claim No. : _____

Name of Insured : Lim Kim Thye

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : \$\$ D.O.A : 21/12/19

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

SLM 6565L

INSRS:
WSP: Success United
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date / Time

SLM 6565L : X ; SMP 4559R : X

Call 01!

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:

Confirm by:

FINALIZATION

Date/Time:

Confirm with:

Repair Cost: 45

S\$ 290.00

(43 days)

Reduction: 66

%

Email ☐ Call ☐

FINAL SETTLEMENT

Date/Time: 21/1/2021

Confirm with: Sinna

Email ☒ Call ☐

Final Liability:

50

(Agreed / Assessed) BOLA S/N No. : 30

If NO or B 28, Ass. Lia :

Repair Cost: 3103.00

S\$ 1551.50

Loss of Rental (LOR):

S\$

(days)

Loss of Use (LOU) 600.00

S\$

300.00 x 4 days

Loss of Income (LOI):

S\$

(\$ x days)

LOR only ☐ LOU only ☒LOR + LOU ☐LOR + LOI ☐

[Tick only one]

GIA/LTA Search

S\$ 2.00

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

Total: S\$ 1853.50 Global Sum S\$ 1850.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☐ Call ☐

Payee 1:

S\$

1850.00

Name 1:

Success United Pte Ltd

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3: