

INS. CASE OWNER:

CC 4/111 2000 0268 / R1gs3

LKK:

IDAC:

Surveyor:

Rasul

DOI:

6/1/2020

Date / Time :

3/1/2020

Registered in Merimen:

6/1/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : YP 4075C

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :SS _____ D.O.A : 28/12/19

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

XD9303L

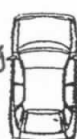


INSRS:

WSP: ~~SEMBWASTE PTE LTD~~Tel : ~~12-110~~

Liability : SEMBWASTE

RMKS: PTE LTD



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

XD9303L : X
YP4075C : NA/1119022883/24; DOA: 28/12/19

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: P/P

S\$ 11,400.00

(14 days)

Reduction: 2100.00

% 16

Email ☐ Call ☐

FINAL SETTLEMENT

Date/Time: 09/05/2020

Confirm with JOANNE

Email ☒ Call ☐

Final Liability:

% 100

(Agreed / Assessed) BOLA S/N No. : 28

If NO or B 28, Ass. Lia :

0%

Repair Cost:

S\$ 11,400.00

C.C (OI 2ND)

Loss of Rental (LOR):

S\$

(days)

Loss of Use (LOU):

S\$ 2100.00

(\$ 150 x 14 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\$

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\$ 13,507.45

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☒ Call ☐

Payee 1:

S\$ 13,507.45

Name 1:

SEMBWASTE PTE LTD