

INS. CASE OWNER:

CC 4 / AIG 2000 3688

1 U65392

LKK:

IDAC:

Surveyor:

Marcus

DOI:

6/3/2020

Date / Time:

5/3/2020

Registered in Merimen:

6/3/2020

Pre-assign / CCU / FTE



Insured Vehicle No.:

SME 3076G

Claim No.:

1200878329SG

Name of Insured:

Yow Seok Fun

Policy No.:

Insured Tel No.:

HP:

Make / Model:

Excess Sec II :SS

D.O.A: 21/2/2020

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

SLR 9631H



INSRS:

WSP: Focus Auto

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/Time

SLR 9631H: X ; SME 3076G: X

Make verify by TP. 21/2/2020; 01-21/4/2020

01 VIDEO FOOTAGE UPLOADED BY AIG IN MERIMEN

18/8/2020.

settled & closed (file put in drawer)

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:

Repair Cost:

US

SS 2,400.00

(3 days)

Reduction:

50.24

%

FINAL SETTLEMENT

Date/Time:

18/8/2020

Confirm with

JENNY KOH

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

NIL

Repair Cost:

(w/gst)

SS 2,568.00

Loss of Rental (LOR):

SS

180.00

(3 days)

X \$60.00

Loss of Use (LOU):

SS

-

(\$ x days)

Loss of Income (LOI):

SS

-

(\$ x days)

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

SS

31.00

Medical:

SS

-

Disbursement:

SS

-

Legal Cost

SS

-

Total:

SS

2,774.00

Global Sum SS:

-

FINAL PAYMENT

Date/Time:

Confirm with:

Payee 1:

SS

2,774.00

Name 1:

Focus Auto ME LTD

Payee 2: (Strike if N.A.)

SS

-

Name 2:

-

Payee 3: (Strike if N.A.)

SS

-

Name 3:

-

Confirm by:

Email

Call

Email

Call

If NO or B 28, Ass. Lia:

01 reversed & not TP

1) Claim status: Normal Reject Private Settle

2) Report Format: TP

3) Survey fee: \$320.00