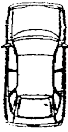


Surveyor: \_\_\_\_\_ DOI: \_\_\_\_\_ Date / Time : \_\_\_\_\_  
Registered in Merimen: \_\_\_\_\_

Pre-assign / CCU / FTE



Insured Vehicle No. : \_\_\_\_\_

Claim No. : \_\_\_\_\_

Name of Insured : \_\_\_\_\_

Policy No. : \_\_\_\_\_

Insured Tel No. : \_\_\_\_\_ HP: \_\_\_\_\_

Make / Model : \_\_\_\_\_

**Excess Sec II :S\$** \_\_\_\_\_ **D.O.A :** \_\_\_\_\_

Place of Accident : \_\_\_\_\_

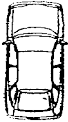
Is driver the owner? ( YES / NO ) Nature of Accident :

If **NO**, Driver Name / Age :

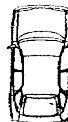
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : (V/L: YES / NO )

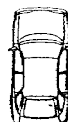
Insured Liability :	%	<b>Final ? Yes / No</b>
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INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:



INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:



INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:



INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:

Date/ Time				
		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:		
		<b>Documentation Check List:</b>		
		Handler	Typist	
		Notification ltr (if non-pickup)	<input type="checkbox"/>	<input type="checkbox"/>
		After call ltr to OI:	<input type="checkbox"/>	<input type="checkbox"/>
		Authorisation To Act:	<input type="checkbox"/>	<input type="checkbox"/>
		Release Voucher:	<input type="checkbox"/>	<input type="checkbox"/>
		Final Repair Bill:	<input type="checkbox"/>	<input type="checkbox"/>
		Car Rental Invoice:	<input type="checkbox"/>	<input type="checkbox"/>
		Towing Invoice	<input type="checkbox"/>	<input type="checkbox"/>
		LTA / GIA :	<input type="checkbox"/>	<input type="checkbox"/>
		Medical Bill:	<input type="checkbox"/>	<input type="checkbox"/>
		PIR:	<input type="checkbox"/>	<input type="checkbox"/>
		Mandate/Reject Instruction:	<input type="checkbox"/>	<input type="checkbox"/>
		LOD	<input type="checkbox"/>	<input type="checkbox"/>
		Payment Breakdown Form:	<input type="checkbox"/>	<input type="checkbox"/>
		Post-Repair Photos:	<input type="checkbox"/>	<input type="checkbox"/>
		Others:	<input type="checkbox"/>	<input type="checkbox"/>
<b>PRELIMINARY ADVICE</b>				
Date/Time:	Sent By:			
<b>FINALIZATION</b>				
Date/Time:	Confirm with:		Confirm by:	
Repair Cost: L/S	S\$ 27,000.00	( 12 days) Reduction: 51,061.32 % 65	Email <input type="checkbox"/>	Call <input type="checkbox"/>
<b>FINAL SETTLEMENT</b>				
Date/Time:	24/06/2020	Confirm with WILLIAM	Email <input checked="" type="checkbox"/>	Call <input type="checkbox"/>
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 4	If NO or B 28, Ass. Lia :	
Repair Cost: (W/GST)	S\$ 25,252.00	(AXA'S INSTRUCTION)		
Loss of Rental (LOR):	S\$ 2625.00	( 21 days) x \$125		
Loss of Use (LOU):	S\$ (\$ x days)			
Loss of Income (LOI):	S\$ 1050.00 (\$ 50 x 21 days)			
LOR only <input type="checkbox"/>	LOU only <input type="checkbox"/>	LOR + LOU <input type="checkbox"/>	LOR + LOI <input checked="" type="checkbox"/>	[Tick only one]
GIA/LTA Search	S\$ 2.00			
Medical:	S\$		1) Claim status: <input checked="" type="checkbox"/> Normal/Reject/Private Settle	
Disbursement:	S\$	(e.g. Tow/ Independent )	2) Report Format: TP	
Legal Cost	S\$ 500.00	INDEPENDENT SURVEY FEE	3) Survey fee: 350.00	
<b>Total:</b>	<b>S\$ 29,429.00</b>	<b>Global Sum S\$: 29,400.00</b>		
<b>FINAL PAYMENT</b>				
Date/Time:	Confirm with:		Email <input checked="" type="checkbox"/>	Call <input type="checkbox"/>
Payee 1:	S\$ 29,400.00	Name 1:	Chunni Motor Work Pte Ltd	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		