

INS. CASE OWNER:

CC 4/III1800

Surveyor:

DOI:

Date / Time :

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

Name of Insured :

Insured Tel No. :

Excess Sec II :S\$

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

Claim No. :

Policy No. :

Make / Model :

Place of Accident :

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

Insured Liability :

%

Final ? Yes / No

SJL 9923 X



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

SJL 9923 X-X: PC 39894, 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: MRB

Repair Cost:

P/P S\$ 816.00

(

3

days) Reduction:

78 %

Email

Call

FINAL SETTLEMENT

Date/Time:

15.02.22

Confirm with BEN

Email

Call

Final Liability:

100

%

50

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

If NO or B 28, Ass. Lia :

Repair Cost w/GST:

\$873.12 S\$ 436.56

CONFLICTING VERSION

Loss of Rental (LOR):

-

S\$

-

(

days)

Loss of Use (LOU):

\$195

S\$

97.50

(\$ 65

x

3

days)

Loss of Income (LOI):

-

S\$

-

(\$

x

days)

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

\$7.45

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: \$350

Total:

\$1,075.57

S\$

541.51

Global Sum S\$: 550.00

FINAL PAYMENT

Date/Time:

15.02.22

Confirm with: BEN

Email

Call

Payee 1:

S\$ 550.00

Name 1:

ALLSWELL MOTOR TRADERS

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3: