

INS. CASE OWNER:

CC 4, ASM 1800 9289, Ana3

LKK:

IDAC:

45732

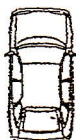
Surveyor:

DOI:

Date / Time:

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

Name of Insured:

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A:

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:

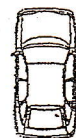
Place of Accident:

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

Insured Liability:

%

Final ? Yes / No



INSRS:

WSP:

Tel:

Liability:

RMKS:

07



INSRS:

WSP:

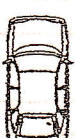
Tel:

Liability:

RMKS:

Chia Auto

TP



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/Time

02/08/18
vic

GBC 8924S - call/ASM 1800 9289 / Ana3: 02/08/18
 GBC 728M - call/Ana3 721745 / Kmb7: 02/08/18
 - CAN DO B/G

02/08/18
11:00 AM

- spoke to OIP. confirmed accident
 details and who involved in a 4
 way C.C. in was the last car in
 rear-ended TP. informed TP claim
 agreed to settle. number not known.
 send letter to OI.

14/09/18
9/10/18

- BUILT LIABILITY QUOTE.
 - FINALISED.
 - UPLD IT IN GUMTREE/CLAUDE
 - AXA APPROVED WHATEVER

25/09/19
02/09/19

- TP LOD IN BY BUILT
 - send 1st offer to TP.
 - TP accepted offer. to forum M.
 - all docs in order.

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: to forum

PRELIMINARY ADVICE

Date/Time:

14/09/18

Sent By:

VIC

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

46

S\$

8,300.00

(10

days) Reduction:

23

%

Email

Call

FINAL SETTLEMENT

Date/Time:

02/09/19

Confirm with

VIC WONG

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

28

If NO or B 28, Ass. Lia:

100%

Repair Cost:

S\$

8,300.00

(4 way C.C.; OIP letter)

Loss of Rental (LOR):

S\$

-

(days)

Loss of Use (LOU):

S\$

1,440.00

\$120 x 12

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\$

-

Disbursement:

S\$

-

Legal Cost

S\$

-

Total:

S\$

9,747.45

Global Sum S\$:

-

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

9,747.45

Name 1:

CHIA AUTO SERVICES PTE LTD

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

-

Payee 3: (Strike if N.A.)

S\$

-

Name 3:

-