

INS. CASE OWNER:

PA
CC 4 / AXA 180

13479, Y1 2103

LKK:

IDAC:

Surveyor:

MTH

DOI:

23/1/18

Date / Time:

23/1/18

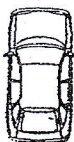
Pre-assign / CCU / FTE

SHB 7628M

CHECK survey on 26/1/18 - before file assignment.

Registered in Merimen:

131/18 by AXA



Insured Vehicle No.:

TRANS CAR SERVICES PLC

Claim No.:

P1680520

Name of Insured:

Policy No.:

Insured Tel No.:

HP:

Make / Model:

C-EPICA

Excess Sec II :SS

5,000.00

D.O.A.:

19/6/18

Place of Accident:

New upper Changi rd East

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Leo Yeok Han John
96965319

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

Driver Tel No.:

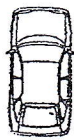
(V/L: YES / NO)

Insured Liability:

%

Final ? Yes / No

SLR 4764R



INSRS:

WSP:

Tel:

Liability:

RMKS:

Regurs



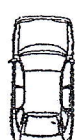
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

27/1/18
2/1/18

SLR 4764R - X;

SHB 7628M - C4/AXA 7023527/1/18; 200 1/1/18

Pinity TP COD

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: GRAB

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\$ 2,170.40

(3 days)

Reduction:

70

%

Email

Call

FINAL SETTLEMENT

Date/Time:

21/01/20

Confirm with:

ALOX

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No.:

2A

If NO or B 28, Ass. Lia:

Repair Cost:

(w/69T)

S\$ 2,522.33

COLO RATE-PAID TP

Loss of Rental (LOR):

S\$

-

(days)

Loss of Use (LOU):

S\$

550.00

\$ 110

x 5

days)

(666.95 GRAB FARE + 101.40)

Loss of Income (LOI):

S\$

-

(\$

x

days)

LOR only

LOU only

LOR + LOU

LOR + LOI

[Tick only one]

GIA/LTA Search

S\$

-

Medical:

S\$

-

Disbursement:

S\$

-

Legal Cost

S\$

-

Total:

S\$ 2,872.33

Global Sum S\$:

2,860.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$ 2,860.00

Name 1:

PEGASUS ENGINEERING & TRADING PTE LTD

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

-

Payee 3: (Strike if N.A.)

S\$

-

Name 3:

-