

15/5/2010

INS. CASE OWNER:

CC 4/LPC1801

LKK:
IDAC:

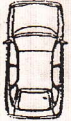
Surveyor:

DOI:

Date / Time

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

Name of Insured :

Insured Tel No. :

Excess Sec II : \$\$

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

Claim No. :

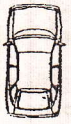
Policy No. :

Make / Model :

Place of Accident :

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

Insured Liability : % Final ? Yes / No



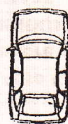
INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

21/7/18

TH

09/07/19

14-1-19

29-1-19

SLC 1A11G -x

SGN 3086B -x

OI rear-ended to TP.
- OI LG, TP LOD IN
- LFC APPROVED MANDATE

- SEND 1st OFFER TO TP.
- TP ACCEPTED OFFER.
- ALL DOCS IN ORDER.
- TO CLOSE.

LOD IN. FOR MANDATE

FOR MANDATE

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:

Repair Cost:

SS 8,063.87

10 days

Reduction: 37 %

Email ☐ Call ☐

FINAL SETTLEMENT

Date/Time:

Confirm with:

Email ☒ Call ☐

Final Liability:

%

100

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

27

Repair Cost:

SS 8,628.02

Loss of Rental (LOR):

SS

1,800

(12 days) 40

Loss of Use (LOU):

SS

(S

x

days)

Loss of Income (LOI):

SS

(S

x

days)

LOR only ☒LOU only ☐LOR + LOU ☐LOR + LO ☐

[Tick only one]

GIA/LTA Search

SS

2.41

Medical:

SS

180

Disbursement:

SS

-

(e.g. Tow / Independent)

Legal Cost

SS

-

Total:

SS

10,610.02

Global Sum SS:

-

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☐ Call ☐

Payee 1:

SS

10,610.02

Name 1:

ACCORD AUTO SERVICES PTE LTD

Payee 2: (Strike if N.A.)

SS

=

Name 2:

=

Payee 3: (Strike if N.A.)

SS

=

Name 3:

=

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee: \$450.00