

INS. CASE OWNER:

CC /CTI1801

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 :S\$

Is driver the owner?

(YES / NO)

Nature of Accident :

Claim No.

Policy No.

Make / Model :

Place of Accident :

If NO, Driver Name / Age : LUUK TIM NIE

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

Driver Tel No. :

(V/L: YES / NO)

Insured Liability :

%	Final ?	Yes / No
100	100	100
90	90	90
80	80	80
70	70	70
60	60	60
50	50	50
40	40	40
30	30	30
20	20	20
10	10	10
0	0	0

GMA 8277R



INSRS:
WSP:
Tel :
Liability
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		DATE / PIC
31/10/18	SH 8 277R - CH / 41180 UNV / FMB 3 2200.1 / 1/18 GB 6 480 pm - p	Non-Reporting ltr (1st): Non-Reporting ltr (2nd): Non-Reporting ltr (Final): Notification ltr (if non-pickup): Call OI: After call ltr to OI: 10/04/19 - vic
10/04/19	- FIVE REVIEWED - ORIGINAL TP LOD IN - FIVE REVIEWED - OLD REPORTED NOT ADVANCE OF ACCIDENT. - TP CHANGED CANS. TP VIDEO IN. V PRIVE / VIC / SHA 827R	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: ☐ ☐
15/04/19	- FIVE REVIEWED. STAYED ON TP VIDEO. OLD CHANGED CANS. SEND LETTER TO OI TO NOTIFY TP CLAIM & NCD LOSERS. - SEND 1st OFFER TO TP - OLD CANS TO OFFICE. VIEWED BOOKER. DOESN'T WANT TO SETTLE. BEAT URGENCY & DAMAGES TO TP.	
PRELIMINARY ADVICE Date/Time: 22/10/18 Sent By: BS		
FINALIZATION Date/Time: Confirm with: Confirm by:		
Repair Cost: PP \$5 1,223.04 (2 days) Reduction: 15 %	Email ☐ Call ☐	
FINAL SETTLEMENT Date/Time: 11/04/19 Confirm with: WILLIAM		
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : NIL	Email ☒ Call ☐	
Repair Cost: (w/GR) \$5 1,308.65	If NO or B 28, Ass. Lia : (OLD CHANGED CANS) TP VIDEO IN	
Loss of Rental (LOR): \$5 230.00 (2 days) X \$115.00		
Loss of Use (LOU): \$5 100.00 \$50 x 2 days		
Loss of Income (LOI): \$5 - (\$ x days)	Below 40K WABRTE	
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LO ☒ [Tick only one]		
GIA/LTA Search \$5 7.49		
Medical: \$5 -	1) Claim status: No final/Reject/Private Settle	
Disbursement: \$5 - (e.g. Tow/ Independent)	2) Report Format:	
Legal Cost \$5 -	3) Survey fee: \$400.00	
Total: \$5 1,646.14 Global Sum \$5: 1,640.00		
FINAL PAYMENT Date/Time: Confirm with: Email ☐ Call ☐		
Payee 1: \$5 1,640.00 Name 1: COMPARTMENTAL GRO ENGINEERING PTY LTD		
Payee 2: (Strike if N.A.) \$5 - Name 2: -		
Payee 3: (Strike if N.A.) \$5 - Name 3: -		