

15/5/2010

INS. CASE OWNER:

CC / AXA1802

LKK:

IDAC:

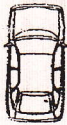
Surveyor:

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. :

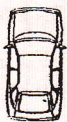
Policy No. :

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	STAGE	DATE / PIC
15/11/18	Non-Reporting ltr (1st):	
	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
	Call OI:	
	After call ltr to OI:	
19/11/18	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: Confirm by:		
FINALIZATION Date/Time: Confirm with: Confirm by:		
Repair Cost: P/P	\$S 9,664.19	6 days) Reduction: 16 %
FINAL SETTLEMENT Date/Time: 24/05/19	Confirm with: AUSAUSA	Email: Call:
Final Liability: % 100	(Agreed / Assessed) BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost: (w/ass)	\$S 10,340.68	COV CHANGED LANE
Loss of Rental (LOR):	\$S (days)	
Loss of Use (LOU):	\$S 100.00 x 8 days)	
Loss of Income (LOI):	\$S (\$ x days)	
LOR only ☐ LOU only ☒	LOR + LOU ☐ LOR + LO ☐ [Tick only one]	
GIA/LTA Search	\$S 2.00	
Medical:	\$S -	
Disbursement:	\$S -	(e.g. Tow/ Independent)
Legal Cost	\$S -	
Total:	\$S 10,822.68	Global Sum \$S: -
FINAL PAYMENT Date/Time:	Confirm with:	Email: Call:
Payee 1:	\$S 10,822.68	Name 1: CYCLE & CARRIAGE INDUSTRIES PTE LTD
Payee 2: (Strike if N.A.)	\$S -	Name 2: -
Payee 3: (Strike if N.A.)	\$S -	Name 3: -