

15/5/2010

INS. CASE OWNER:

CC ^{ASM} / AXA1900

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?

PH 5115M

GOM TRANSPORT SERVICES CO PTE

HP:

D.O.A :

Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

Claim No. :

Policy No. :

Make / Model :

Place of Accident :

8/7/11

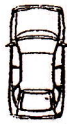
SANDOLGAH (102147)

PROCESSED

PTBU

SLE THAS BKE

SLE 5097B



INSRS:

WSP:

Tel :

Liability :

RMKS:

SM
Automotive

INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

SLE 5097B-X

PH 5115M-X

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:

- HINKEBBS.

- TP LOD IN BY EMAIL

* smartclaim

- OI NR

- Spoke to OI (Co. rep: ms. Siti). Informed TP claim & NCD will be affected if applicable. OI agreed to settle. Sent letter to OI.

- UPLOAD MANDATE IT IN OC.

- AXA APPROVED MANDATE

- SEND 1st OFFER TO TP.

- TP ACCEPTED OFFER.

- ALL BOOK IN ORDER.

- TO CLOSE.

18/04/11 @ 4:20 pm
Khancha16/05/11
02/06/11
04/06/11

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

S\$

7,600.00

(6

days) Reduction:

65

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with

Email

Call

Final Liability:

%

100

(Agreed / Assessed)

BOLA S/N No. :

5097B

If NO or B 28. Ass. Lia :

Repair Cost:

S\$

7,600.00

Loss of Rental (LOR):

S\$

600.00

(6

days) X \$100

Loss of Use (LOU):

S\$

-

(\$

x

days)

Loss of Income (LOI):

S\$

-

(\$

x

days)

LOR only

LOU only

LOR + LOU

LOR + LO

[Tick only one]

GIA/LTA Search

S\$

7.45

Medical:

S\$

-

Disbursement:

S\$

-

Legal Cost

S\$

-

(e.g. Tow/Independent)

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

4350.00

Total:

S\$

8,207.45

Global Sum S\$:

8,200.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

S\$

8,200.00

Name 1:

SM AUTOMOTIVE

Payee 2: (Strike if N.A.)

S\$

-

Name 2:

-

Payee 3: (Strike if N.A.)

S\$

-

Name 3:

-