

Surveyor:

DOI:

Date / Time :

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

Name of Insured :

Insured Tel No. :

Excess Sec II :SS

Is driver the owner? (YES / NO)

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

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:

25/08/2020

Pls refer to VIEWS for details.

PRELIMINARY ADVICE

Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost: L/sum

S\$ 4,350.00 (6 days) Reduction: 99 %

Email ☐ Call ☐

FINAL SETTLEMENT

Date/Time: 25/08/2020

Confirm with: Zhi Yang

Email ☒ Call ☐

Final Liability:

% 100 (Agreed / Assessed) BOLA S/N No. : 28

If NO or B 28, Ass. Lia : 0

Repair Cost: w/GST

S\$ 4,450.00 (as per AXA mandate)

Loss of Rental (LOR):

S\$ (days)

Loss of Use (LOU):

S\$ 900.00 (\$150 x 6 days)

Loss of Income (LOI):

S\$ (\$ x days)

LOR only ☐ LOU only ☒LOR + LOU ☐ LOR + LOI ☐ [Tick only one]

GIA/LTA Search

S\$ 7.45

Medical:

S\$

Disbursement:

S\$

Legal Cost

S\$

1) Claim status: Normal/ ~~Private/ Public~~

2) Report Format: TP

3) Survey fee: \$350.00

Total:

S\$ 5,357.45

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☒ Call ☐

Payee 1:

S\$ 5,357.45

Name 1:

Yong Sing Motor Works

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3: