

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)	<input type="checkbox"/> <input type="checkbox"/>
			After call ltr to OI:	<input checked="" type="checkbox"/> <input type="checkbox"/>
			Authorisation To Act:	<input checked="" type="checkbox"/> <input type="checkbox"/>
			Release Voucher:	<input checked="" type="checkbox"/> <input type="checkbox"/>
			Final Repair Bill:	<input checked="" type="checkbox"/> <input type="checkbox"/>
			Car Rental Invoice:	<input checked="" type="checkbox"/> <input type="checkbox"/>
			Towing Invoice	<input type="checkbox"/> <input type="checkbox"/>
			LTA / GIA :	<input checked="" type="checkbox"/> <input type="checkbox"/>
			Medical Bill:	<input type="checkbox"/> <input type="checkbox"/>
			PIR:	<input type="checkbox"/> <input type="checkbox"/>
			Mandate/Reject Instruction:	<input checked="" type="checkbox"/> <input type="checkbox"/>
			LOD	<input checked="" type="checkbox"/> <input type="checkbox"/>
			Payment Breakdown Form:	<input type="checkbox"/> <input type="checkbox"/>
			Post-Repair Photos:	<input type="checkbox"/> <input type="checkbox"/>
			Others:	<input type="checkbox"/> <input type="checkbox"/>
PRELIMINARY ADVICE Date/Time: Sent By:				
FINALIZATION Date/Time: Confirm with: Confirm by:				
Repair Cost:	S\$ 2,126.90	(4 days) Reduction: 29,467.08/93 %	Email <input type="checkbox"/>	Call <input type="checkbox"/>
FINAL SETTLEMENT Date/Time: 21/10/2020 Confirm with WAI YIN Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>				
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 15	If NO or B 28, Ass. Lia :	
Repair Cost: (W/GST)	S\$ 2,275.78			
Loss of Rental (LOR):	S\$ 680.40	(6 days) X \$113.40		
Loss of Use (LOU):	S\$ (\$ x days)			
Loss of Income (LOI):	S\$ (\$ x days)			
LOR only <input checked="" type="checkbox"/> LOU only <input type="checkbox"/>	LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/>	[Tick only one]		
GIA/LTA Search	S\$ 7.49			
Medical:	S\$		1) Claim status: Normal/Reject/Private Settle	
Disbursement:	S\$	(e.g. Tow/ Independent)	2) Report Format: TP	
Legal Cost	S\$		3) Survey fee: \$ 400	
Total:	S\$ 2,963.67	Global Sum S\$: 2,960.00		
FINAL PAYMENT Date/Time: Confirm with: Email <input type="checkbox"/> Call <input type="checkbox"/>				
Payee 1:	S\$ 2,960.00	Name 1:	TRANS-CAB AUTO SERVICES PTE LTD	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		