

INS. CASE OWNER:

IDAC:

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)

Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

Claim No. :

Policy No. :

Make / Model :

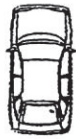
Place of Accident :

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
	SKV 3380 L - X ; SDA 79542 - X		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:	☐
PRELIMINARY ADVICE Date/Time:			Post-Repair Photos:	☐
Sent By:			Others:	☐
FINALIZATION Date/Time:			Confirm with:	Confirm by:
Repair Cost: L/SUM S\$ 3,200.00 (4 days) Reduction: 69 %			Email ☐	Call ☐
FINAL SETTLEMENT Date/Time: 15/11/2021 Confirm with SUKYI			Email ☒	Call ☐
Final Liability: % 50 (Agreed / Assessed) BOLA S/N No. : NIL			If NO or B 28, Ass. Lia :	
Repair Cost: 3,424.00 S\$ 1,712.00				
Loss of Rental (LOR): 540.00 S\$ 270.00 (3 days) x \$180.00				
Loss of Use (LOU): S\$ (\$ x days)				
Loss of Income (LOI): S\$ (\$ x days)				
LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]				
GIA/LTA Search S\$ 5.35				
Medical: S\$			1) Claim status: Normal/Reject/Private Settlement	
Disbursement: S\$ (e.g. Tow/ Independent)			2) Report Format: TP	
Legal Cost S\$			3) Survey fee: 100.00	
Total: S\$ 1,987.35			Global Sum S\$: 350.00 - 250.00	
FINAL PAYMENT Date/Time:			Confirm with: Email ☐ Call ☐	
Payee 1: S\$ 1,987.35			Name 1: New Hock Teck Motor Workshop	
Payee 2: (Strike if N.A.) S\$			Name 2:	
Payee 3: (Strike if N.A.) S\$			Name 3:	

