

INS. CASE OWNER:

ASSIGNMENTSurveyor: **RASUL**DOI: **03/06/2022**Date / Time : **03/06/2022**Registered in Merimen: **03/6/22****Pre-assign / CCU / FTE**Insured Vehicle No. : **SJT 3730H**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : \$ _____ D.O.A : **01.06.2022 21:15**

Place of Accident : _____

Is driver the owner? (YES / NO) Nature of Accident : _____

If NO, Driver Name / Age : _____

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : _____ (V/L: YES / NO)

Insured Liability : % **Final ? Yes / No****SHD 6313S**INSRS:
WSP: **STRIDES**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	Reference Entry	Date Customer Name	Vehicle No.	TP Vehicle No.	Accident Date	Close Date	Created By	STAGE	DATE / PIC	
SHD 6313S -	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	Non-Reporting ltr (1st):			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	Non-Reporting ltr (2nd):			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	Non-Reporting ltr (Final):			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	Non-Reporting ltr (if non-pickup):			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	Call OI:			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	After call ltr to OI:			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	Documentation Check List:	Handler	Typist	
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	Notification ltr (if non-pickup)			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	After call ltr to OI:			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	Authorisation To Act:			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	Release Voucher:			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	Final Repair Bill:			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	Car Rental Invoice:			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	Towing Invoice			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	LTA / GIA :			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	Medical Bill:			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	PIR:			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	Mandate/Reject Instruction:			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	LOD			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	Payment Breakdown Form:			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	Post-Repair Photos:			
	CC3/AXA12013871/R1hdc3	26/11/2012	SHD 6313S FBE 3215C	13/07/2012	30/11/2012	CXC	Others:			
PRELIMINARY ADVICE	Date/Time:	Sent By:								
FINALIZATION	Date/Time:	Confirm with:					Confirm by:			
Repair Cost:	L/SUM	S\$ 2,900.00	(3 days)	Reduction:	81	%	Email	☐	Call	☐
FINAL SETTLEMENT	Date/Time:	Confirm with					Email ☒ Call ☐			
Final Liability:	%	100	(Agreed / Assessed)	BOLA S/N No. :	11a		If NO or B 28, Ass. Lia :			
Repair Cost:	S\$	2,900.00								
Loss of Rental (LOR):	S\$	516.30	(5 days)	X \$	103.26					
Loss of Use (LOU):	S\$		(\$ x days)							
Loss of Income (LOI):	S\$	200.00	(\$ 40 x 5 days)							
LOR only ☐	LOU only ☐	LOR + LOU ☐	LOR + LOI ☒	[Tick only one]						
GIA/LTA Search	S\$	7.00								
Medical:	S\$									
Disbursement:	S\$	(e.g. Tow/ Independent)								
Legal Cost	S\$									
Total:	S\$	3,623.30	Global Sum S\$:		3,620.00					
FINAL PAYMENT	Date/Time:	Confirm with:					Email ☒ Call ☐			
Payee 1:	S\$	3,620.00	Name 1:	Strides Taxi Pte Ltd						
Payee 2: (Strike if N.A.)	S\$		Name 2:							
Payee 3: (Strike if N.A.)	S\$		Name 3:							