

ASSIGNMENT

Surveyor: _____

DOI: _____

Date / Time : _____

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SLQ 5573Z**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : _____

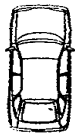
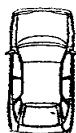
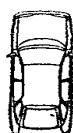
Place of Accident : _____

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**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:

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost: **L/SUM**S\$ **2,400.00** (**4** days) Reduction: **87** %Email ☐ Call ☐**FINAL SETTLEMENT**Date/Time: **02/12/2024**Confirm with **Joanne**Email ☒ Call ☐Final Liability: **%50** (Agreed / Assessed) BOLA S/N No. : **32**

If NO or B 28, Ass. Lia :

Repair Cost: S\$ **1,308.00** (**\$2,400.00 + 9% GST @ 50%**)

Loss of Rental (LOR): S\$ _____ (_____ days)

Loss of Use (LOU): S\$ **120.00** (\$ **60** x **4** days) **\$240.00 @ 50%**

Loss of Income (LOI): S\$ _____ (\$ _____ x _____ days)

LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]GIA/LTA Search S\$ **31.00**

Medical: S\$ _____

Disbursement: S\$ _____ (e.g. Tow/ Independent)

Legal Cost S\$ _____

1) Claim status: Normal/~~Reject/Private Settle~~2) Report Format: **TP**3) Survey fee: **\$370.00****Total:** S\$ **1,459.00****Global Sum S\$: 1,400.00****FINAL PAYMENT**

Date/Time:

Confirm with:

Email ☒ Call ☐Payee 1: S\$ **1,400.00**Name 1: **JL PERFECT AUTOWORK PTE LTD**

Payee 2: (Strike if N.A.) S\$ _____

Name 2: _____

Payee 3: (Strike if N.A.) S\$ _____

Name 3: _____