LKK:

IDAC:

INS. CASE OWNER: **NORSIAH** | **CC6/AIG19019728/Uka3**

ASSIGNMENT

Surveyor: **MARCUS** DOI: 07/11/2019   Date / Time: 07/11/2019

Registered in Merimen: 07/11/2019

01

Pre-assign / CCU / FTE

Insured Vehicle No. : **SLR 613U**	Claim No. : 6223378441SG
Name of Insured : **NG THIAM HOE**	Policy No. : 1700033743
Insured Tel No. : HP: +65-96824658	Make / Model : SUBARU FORESTER-2.0 I-L (SJ) (A)
Excess Sec II :S$ D.O.A : 07/11/2019 07:30	Place of Accident : BKE AFTER MANDAI EXIT

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**

SFN 3666P →

INSRS: WSP: **FASTECH** Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	SFN 3666P - X	SLR 613U - X	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:	S$	(days) Reduction:	%	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time:	Confirm with		Email ☐ Call ☐	
Final Liability:	%	(Agreed / Assessed) BOLA S/N No. :		If NO or B 28, Ass. Lia :	
Repair Cost:	S$				
Loss of Rental (LOR):	S$	(days)			
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$				
Medical:	S$			1) Claim status: Normal/Reject/Private Settle	
Disbursement:	S$	(e.g. Tow/ Independent)		2) Report Format:	
Legal Cost	S$			3) Survey fee:	
Total:	S$	Global Sum S$:			
FINAL PAYMENT	Date/Time:	Confirm with:		Email ☐ Call ☐	
Payee 1:	S$	Name 1:			
Payee 2: (Strike if N.A.)	S$	Name 2:			
Payee 3: (Strike if N.A.)	S$	Name 3:			

A14/ 19728/44.

ASSIGNMENT

ASS. REC. BY:	Rbr:
Nicus K	

From: Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SFN3666P

at Workshop m/s   P.

of

Insured: SLR6134

Policy No.

Claims No.

Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its
       repair at the time of inspection.

Bal. or Market Value: 24

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days   Res.: Yes or No

Lum Sum: %   3 Val.: Yes or No

CA / REV / REP. / 24 HRS   09SH
                   Vehicle: IN / OUT

Date: Person Contacted:

	N/S	O/S

Veh No: SFN3666P   Yr Regn: 5.08

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or   A/

Make: Honda stream   c.c 1799

Colour: Blue   A/C: Insured / Std / NI / NA

Sp.Reading 272609   T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: RN6106830U

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F:
         R: 208/55-R16

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or   Tourador

Front		Rear	
R/Bal. 6	mm	R/Bal. 6	mm
L/Bal. 6	mm	L/Bal. 6	mm
D.O.A. 7/11/19		D.O.I. 7/11/19	

Survey held at

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Rear

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	5yrs 6nt.
	LTA 13694 21-8-2023
	ref 10306

Date/Time, File Pass to?   ☐ : Preli. Report

1)   ☐ : Final Report

Date/Time, File Return to?

2)

Report Format :

Lump Sum / I.B.J...

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp   ($)   S + RS. SI
       ☐ : Interview   ($)   Photos
       ☐ : Tech. Invs ($)   Others
       ☐ : Week end ($)

Survey Fee:

Transportation:

TOTAL