

INS. CASE OWNER:

CC6 / ALG 2000 / 749 / Uks3

IDAC:

ASSIGNMENT

Surveyor:

MARCUS

DOI:

3/2/2020

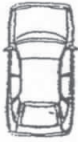
Date / Time:

3/2/2020

Registered in Merimen:

3/2/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SMK 3757T

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : S\$ _____ D.O.A : 1/2/2020

Place of Accident : _____

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

If NO, Driver Name / Age : _____

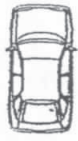
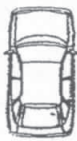
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : _____

(V/L: YES / NO)

Insured Liability : % Final ? Yes / No

SJD 345R

INSRS:
WSP: Fastech
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SJD345R : X ; SMK 3757T : 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
			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\$			
Disbursement:	S\$	(e.g. Tow/ Independent)	1) Claim status: Normal/Reject/Private Settle	
Legal Cost	S\$	2) Report Format:		
		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:		

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: STD 345R
 at Workshop m/s Lf.

nsured: _____
 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.

N/S	O/S

al. or Market Value: _____
 IAC Accident Rpt: Consistent? : Yes or No
 IA / PR Seen: Consistent? : Yes or No
 st. Repairs: days Res.: Yes or No
 im Sum: % 3 Val.: Yes or No

A / REV / REP. / 24 HRS
 ate: _____ Person Contacted: _____
 Vehicle: IN / OUT

Date / Time Action / Instruction
17/11/20 4pm 10min.

Veh No: STD 345R Yr Regn: 5/12/14
 Type: C / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or CA
 Make: Honda J-22 C.C. 1498
 Colour Blue A/C: Insured / Std / NI / NA
 Sp.Reading 84507 T/Radio: Insured / Std / NI / NA

Eng/No: _____
 C/No: JHM6K 5850 FX20L567
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or
 Brake: In order / Jammed / Leaked / Burnt or
 Modi: Nil / S/Rim / STD A/Rim or
 Tyre Size: F: 195/50 R16
 R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or
 Front 6 mm Rear 6 mm
 R/Bal. mm R/Bal. mm
 L/Bal. 9 1/2 mm L/Bal. 6 mm
 D.O.A. 11/20 D.O.I. 3/1/20

Survey held at _____
 Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Rear & Lf.
 The U/C / Chassis frame / Body Structure affected due to collision.

e/Time, File Pass to? ☐ : Prell. Report
☐ : Final Report

e/Time, File Return to?

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

port Format :

mp Sum / I.B.I.: (\$)

Add Fee:

☐ : Site Insp (\$)
☐ : Interview (\$)
☐ : Tech. Invs (\$)
☐ : Weekend (\$)

) \$ + RS. \$

) Photos

) Others

)

TOTAL