

ASSIGNMENTSurveyor: **MARCUS**DOI: **07/02/2020**Date / Time : **07/02/2020**Registered in Merimen: **—****Pre-assign / CCU / FTE**

Insured Vehicle No. : **GBJ 6432X**

Name of Insured : _____

Insured Tel No. : _____ HP: _____

Excess Sec II :S\$ _____ **D.O.A : 04/02/2020**

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

Claim No. : _____ **X**

Policy No. : _____

Make / Model : _____

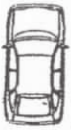
Place of Accident : _____

If **NO**, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

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

Insured Liability : % **Final ? Yes / No****SMG 1683G**

INSRS:

WSP: **FASTECH**

Tel : _____

Liability : _____

RMKS: _____



INSRS:

WSP: _____

Tel : _____

Liability : _____

RMKS: _____



INSRS:

WSP: _____

Tel : _____

Liability : _____

RMKS: _____



INSRS:

WSP: _____

Tel : _____

Liability : _____

RMKS: _____

Date/ Time	SMG 1683G GBJ 6432X	NA/CTI20002004/h4 ; DOA: 02.02.2020 NA/MSG20002002/h4 ; DOA: 04.02.2020	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: CKS
Repair Cost:	L/S S\$ 38,000.00	(22 days) Reduction: 65 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 22.07.20	Confirm with JASON	Email ☐ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost:	w/GST S\$ 40,660.00	OID CHARGED FOR CARELESS DRIVING	
Loss of Rental (LOR):	S\$ -	(days)	
Loss of Use (LOU):	S\$ 1,920.00	(\$ 80 x 24 days)	
Loss of Income (LOI):	S\$ -	(\$ x days)	
LOR only ☐ LOU only ☒	☒ LOR + LOU	☐ LOR + LOI	[Tick only one]
GIA/LTA Search	S\$ 2.00		
Medical:	S\$ -		1) Claim status: Normal/ Reject/Private Settle
Disbursement:	S\$ -	(e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S\$ -		3) Survey fee: \$400
Total:	S\$ 42,582.00	Global Sum S\$: 42,500.00	
FINAL PAYMENT	Date/Time: 22.07.20	Confirm with: JASON	Email ☐ Call ☐
Payee 1:	S\$ 42,500.00	Name 1:	FASTECH AUTO PTE LTD
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	