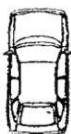


ASSIGNMENTSurveyor: SUN PINDOI: 24/03/2020Date / Time: 24/03/2020Registered in Merimen: 25/03/2020

Pre-assign / CCU / FTE

Insured Vehicle No. : SGC 3660B

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : \$ \$ D.O.A : 22/03/2020

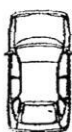
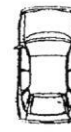
Place of Accident : _____

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**SHD 6447PINSRS:
WSP: **SMRT**
Tel : **AUTOMOTIVE**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SHD 6447P - CC3/AIG16017933/K1yb3s2	21/09/2016	STAGE	DATE / PIC
	SGC 3660B - X		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:	\$ \$ <u>1277.83</u> (<u>3</u> days) Reduction: <u>89</u> %		Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: <u>28/8/2020</u> Confirm with <u>Tan Lee Geh</u>		Email ☒	Call ☐
Final Liability:	% <u>100</u> (Agreed / Assessed) BOLA S/N No. : <u>27</u>		If NO or B 28, Ass. Lia :	
Repair Cost:	\$ \$ <u>1277.83</u>			
Loss of Rental (LOR):	\$ \$ <u>445.12</u> (<u>4</u> days) x <u>\$111.28</u>			
Loss of Use (LOU):	\$ \$ - (\$ x days)			
Loss of Income (LOI):	\$ \$ <u>200.00</u> (\$ <u>50</u> x <u>4</u> days)			
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☒	[Tick only one]			
GIA/LTA Search	\$ \$ <u>7.00</u>			
Medical:	\$ \$ -		1) Claim status: <u>Normal/Reject/Private Settle</u>	
Disbursement:	\$ \$ - (e.g. Tow/ Independent)		2) Report Format: <u>TP</u>	
Legal Cost	\$ \$ -		3) Survey fee: <u>\$320</u>	
Total:	\$ \$ <u>1929.95</u>	Global Sum \$ \$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐	
Payee 1:	\$ \$ <u>1929.95</u>	Name 1: <u>SMRT Taxis Pte Ltd</u>		
Payee 2: (Strike if N.A.)	\$ \$	Name 2:		
Payee 3: (Strike if N.A.)	\$ \$	Name 3:		