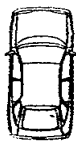


ASSIGNMENT

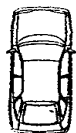
Surveyor: **MARCUS** DOI: **08/04/2020** Date / Time : **08/04/2020**
 Registered in Merimen: _____

Pre-assign / CCU / FTE

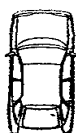
Insured Vehicle No. : **SJJ 4939U**
 Name of Insured : **LIU FU**
 Insured Tel No. : _____ HP: _____
 Excess Sec II :\$ _____ D.O.A : **29/03/2020**

Claim No. : **SNM20D201554**
 Policy No. : **DMPCSN3059241901**
 Make / Model : **KIA MAGENTIS**
 Place of Accident : **SIMS AVE**

Is driver the owner? (YES / **NO**) Nature of Accident : _____
 If **NO**, Driver Name / Age : **YU YINGJIE** OI GIA REPORT: **YES** / NO ; TP GIA REPORT: **YES** / NO
 Driver Tel No. : **+65-98503803** (V/L: **YES** / NO) Insured Liability : % **Final ? Yes / No**

GBC 291L

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



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	GBC 291L - X	STAGE	DATE / PIC
	SJJ 4939U - CS3/AXA12019183/Cvu2-1 ; 29/09/2012	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	☐ ☐
02/09/2020	SETTLED AND CLOSED / NO PHY FILE	LTA / GIA :	☒ ☐
		Medical Bill:	☐ ☐
		PIR:	☐ ☐
		Mandate/Reject Instruction:	☒ ☐
		LOD	☒ ☐
		Payment Breakdown Form:	☐ ☐
PRELIMINARY ADVICE	Date/Time: _____	Sent By: _____	Post-Repair Photos: ☐ ☐
			Others: ☐ ☐
FINALIZATION	Date/Time: _____	Confirm with: _____	Confirm by: _____
Repair Cost: L/S	S\$ 6,700.00 (7 days) Reduction: 69 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 02/09/2020 Confirm with JENNY LAW	Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 100	
Repair Cost:	S\$ 7,169.00		
Loss of Rental (LOR):	S\$ _____ (_____ days)	3 veh C.C, OID is the last car.	
Loss of Use (LOU):	S\$ 720.00 (\$ 80 x 9 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: \$400.00	
Total:	S\$ 7,891.00	Global Sum S\$: 7,800.00	
FINAL PAYMENT	Date/Time: _____	Confirm with: _____	Email ☐ Call ☐
Payee 1:	S\$ 7,800.00	Name 1: FASTECH AUTO PTE LTD	
Payee 2: (Strike if N.A.)	S\$ _____	Name 2: _____	
Payee 3: (Strike if N.A.)	S\$ _____	Name 3: _____	