

ASSIGNMENT

Surveyor: KENNETH DOI: 11/05/2020 Date / Time : 11/05/2020
Registered in Merimen: _____

Pre-assign / CCU / FTE

Insured Vehicle No. : SMM 6305J Claim No. : _____
Name of Insured : _____ Policy No. : _____
Insured Tel No. : _____ HP: _____ Make / Model : _____
Excess Sec II : \$ _____ D.O.A : 01/05/2020 Place of Accident : _____
Is driver the owner? (YES / NO) Nature 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**SLZ 8251K

INSRS:
WSP: **CITY AUTO**
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SLZ 8251K - X	SMM 6305J - 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: KSC	
Repair Cost:	P/P S\$ 450.00	(2 days) Reduction:	31 % Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 17.08.22	Confirm with: VRONICA	Email ☐ Call ☐	
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. :	NIL	
Repair Cost:	w/GST S\$ 481.50	OID SIDE SWIPE TP REAR PORTION (TP WITHIN OWN LANE / REFER VIDEO)		
Loss of Rental (LOR):	S\$ -	(days)		
Loss of Use (LOU):	S\$ 180.00	(\$ 60 x 3 days)		
Loss of Income (LOI):	S\$ -	(\$ x days)		
LOR only ☐ LOU only ☒	LOR + LOU ☐	LOR + LOI ☐	[Tick only one]	
GIA/LTA Search	S\$ 7.45			
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\$ 668.95	Global Sum S\$:		
FINAL PAYMENT	Date/Time: 17.08.22	Confirm with: VRONICA	Email ☐ Call ☐	
Payee 1:	S\$ 668.95	Name 1:	CITY AUTO PTE LTD	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		