

ASSIGNMENTSurveyor: **MARCUS**DOI: **28/05/2020**Date / Time : **27/05/2020**Registered in Merimen: **27/05/2020****Pre-assign / CCU / FTE**Insured Vehicle No. : **SJG 2017J**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ **D.O.A :** **20/05/2020**

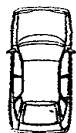
Place of Accident : _____

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****FT 7306X**INSRS:
WSP: **EROFIA MOTOR**
Tel : **TRADING**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	FT 7306X - X	SJG 2017J - 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:	
Repair Cost: L/S	S\$ 750.00 (4 days)	Reduction: 2265.70 % 75	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 21/01/2021	Confirm with LEE LEE	Email ☒	Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 750.00			
Loss of Rental (LOR):	S\$ (days)			
Loss of Use (LOU):	S\$ 120.00 (\$ 20 x 6 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\$	1) Claim status: ☒ Normal/Reject/Private Settle		
Disbursement:	S\$ (e.g. Tow/ Independent)	2) Report Format: TP		
Legal Cost	S\$	3) Survey fee: \$320.00		
Total:	S\$ 870.00	Global Sum S\$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒	Call ☐
Payee 1:	S\$ 870.00	Name 1:	EROFIA MOTOR TRADING PTE LTD	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		