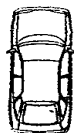


**ASSIGNMENT**Surveyor: **ADRIAN**DOI: **10/06/2020**Date / Time : **10/06/2020**

Registered in Merimen: \_\_\_\_\_

**Pre-assign / CCU / FTE**Insured Vehicle No. : **SLQ 1873J**Claim No. : **S0M02P1T**Name of Insured : **SIAU JUN XIONG**Policy No. : **GA480824**Insured Tel No. : \_\_\_\_\_ HP: **87790689**Make / Model : **HONDA CIVIC**Excess Sec II : \$ \_\_\_\_\_ D.O.A : **09/06/2020**Place of Accident : **ESSO PETROL STATION TO MINOR RD OF ANG MO KIO AVE**Is driver the owner? ( ☒ YES / NO ) Nature of Accident : \_\_\_\_\_

If NO, Driver Name / Age : \_\_\_\_\_

OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NODriver Tel No. : \_\_\_\_\_ (V/L: ☒ YES / NO )Insured Liability : \_\_\_\_\_ % **Final ? Yes / No****SMC 7098C**INSRS:  
WSP: **NEW HOCK**  
Tel : **TECK**  
Liability :  
RMKS:INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:

Date/ Time		
	<b>SMC 7098C - X</b>	<b>STAGE</b>
		<b>DATE / PIC</b>
		Non-Reporting ltr (1st):
	<b>SLQ 1873J - NA/TMI17015054/h4 ; 01/08/2017</b>	Non-Reporting ltr (2nd):
		Non-Reporting ltr (Final):
		Notification ltr (if non-pickup):
		Call OI:
		After call ltr to OI:
		<b>Documentation Check List:</b>
		<b>Handler</b>
		<b>Typist</b>
		Notification ltr (if non-pickup) <input checked="" type="checkbox"/>
		After call ltr to OI: <input checked="" type="checkbox"/>
		Authorisation To Act: <input checked="" type="checkbox"/>
		Release Voucher: <input checked="" type="checkbox"/>
		Final Repair Bill: <input checked="" type="checkbox"/>
		Car Rental Invoice: <input checked="" type="checkbox"/>
		Towing Invoice <input type="checkbox"/>
		LTA / GIA : <input type="checkbox"/>
		Medical Bill: <input type="checkbox"/>
		PIR: <input type="checkbox"/>
		Mandate/Reject Instruction: <input checked="" type="checkbox"/>
		LOD <input checked="" type="checkbox"/>
		Payment Breakdown Form: <input type="checkbox"/>
		Post-Repair Photos: <input type="checkbox"/>
		Others: <input type="checkbox"/>
<b>30/07/2020</b>	<b>SETTLED AND CLOSED</b>	

<b>PRELIMINARY ADVICE</b>	Date/Time:	Sent By:	
<b>FINALIZATION</b>	Date/Time:	Confirm with:	Confirm by:
Repair Cost: <b>L/S</b>	S\$ <b>6,300.00</b> ( <b>6</b> days) Reduction: <b>54.47</b> %	Email <input type="checkbox"/> Call <input type="checkbox"/>	
<b>FINAL SETTLEMENT</b>	Date/Time: <b>29/07/2020</b> Confirm with <b>SUKYI CHONG</b>	Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>	
Final Liability:	% <b>100</b> (Agreed / Assessed) BOLA S/N No. : <b>5b</b>	If NO or B 28, Ass. Lia :	
Repair Cost: (W/GST)	S\$ <b>6,741.00</b>		
Loss of Rental (LOR):	S\$ <b>700.00</b> ( <b>7</b> days) <b>X \$100.00</b>	OI turn and hit TP which is going straight	
Loss of Use (LOU):	S\$ (\$ x days)		
Loss of Income (LOI):	S\$ (\$ x days)		
LOR only <input checked="" type="checkbox"/> LOU only <input type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/> [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: <b>TP</b>	
Legal Cost	S\$	3) Survey fee: <b>\$350.00</b>	
<b>Total:</b>	S\$ <b>7,441.00</b>	<b>Global Sum S\$: 7,400.00</b>	
<b>FINAL PAYMENT</b>	Date/Time:	Confirm with:	Email <input type="checkbox"/> Call <input type="checkbox"/>
Payee 1:	S\$ <b>7,400.00</b>	Name 1: <b>NEW HOCK TECK MOTOR PTE LTD</b>	
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	