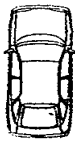


ASSIGNMENTSurveyor: **ADRIAN**DOI: **19/06/2020**Date / Time : **19/06/2020**Registered in Merimen: **19/06/2020****Pre-assign / CCU / FTE**Insured Vehicle No. : **SHD 3212U**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **18/06/2020**

Place of Accident : _____

Is driver the owner? (YES / NO) Nature of Accident : _____

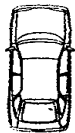
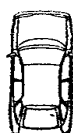
If NO, Driver Name / Age :

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. :

(V/L: YES / NO)

Insured Liability : %

Final ? Yes / No**SLQ 6069G**INSRS:
WSP: **N-51**
Tel : **AUTOMOTIVE**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SLQ 6069G - NA/CTI20006423/z4 - 18/06/2020		
	SHD 3212U - CC3/AXA11017825/M1q1dc1 ; 30/08/2011	Non-Reporting ltr (1st):	
	CC3/III20006792/R1ba3q2 ; 28/06/2020	Non-Reporting ltr (2nd):	
	CS/MSG20001923/Dqf3n2 ; 01/02/2020	Non-Reporting ltr (Final):	
	NS/INC17011154/H1qbe2 ; 06/06/2017	Notification ltr (if non-pickup):	
17/05/2021	Pls refer to VIEWS for details.	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:	☐ ☐
PRELIMINARY ADVICE	Date/Time: _____ Sent By: _____	Post-Repair Photos:	☐ ☐
		Others:	☐ ☐
FINALIZATION	Date/Time: _____ Confirm with: _____ Confirm by: _____		
Repair Cost: L/sum	S\$ 3,200.00 (3 days) Reduction: 39 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 17/05/2021 Confirm with Hui Xin	Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 26	If NO or B 28, Ass. Lia :	
Repair Cost: w/GST	S\$ 3,424.00		
Loss of Rental (LOR):	S\$ _____ (_____ days)		
Loss of Use (LOU):	S\$ 300.00 (\$ 60 x 5 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\$ _____		
Disbursement:	S\$ 100.00 (e.g. Tow Independent)	1) Claim status: Normal/Reject/Private Settle	
Legal Cost	S\$ _____	2) Report Format: TP	
Total:	S\$ 3,831.45 Global Sum S\$:	3) Survey fee: \$350.00	
FINAL PAYMENT	Date/Time: _____ Confirm with: _____ Email ☒ Call ☐		
Payee 1:	S\$ 3,831.45 Name 1: N-51 Automotive Pte Ltd		
Payee 2: (Strike if N.A.)	S\$ _____ Name 2: _____		
Payee 3: (Strike if N.A.)	S\$ _____ Name 3: _____		