

ASSIGNMENTSurveyor: **KENNETH**

DOI: _____

Date / Time : **23.06.2020**Registered in Merimen: **23.06.2020****Pre-assign / CCU / FTE**Insured Vehicle No. : **SCU 1546P**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

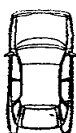
Excess Sec II :S\$ _____ D.O.A : **14.06.2020 12:45**Place of Accident : **KIM KEAT CLOSE**

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****SMF 893D**INSRS:
WSP: **CHENG HOE**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SMF 893D - X	STAGE	DATE / PIC
	SCU 1546P - NA/AIG16002199/d2 ; 01.02.2016	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:	☐ ☐
PRELIMINARY ADVICE	Date/Time: _____	Sent By: _____	Post-Repair Photos: ☐ ☐
			Others: ☐ ☐
FINALIZATION	Date/Time: _____	Confirm with: _____	Confirm by: KSC
Repair Cost: P/P	S\$ 1,160.85	(3 days) Reduction: 18 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 26.01.21	Confirm with JUNE	Email ☐ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S\$ 1,242.11	OI HIT TP PARKED VEHICLE	
Loss of Rental (LOR):	S\$ -	(_____ days)	
Loss of Use (LOU):	S\$ 300.00	(\$ 100 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\$ 8.00		
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: \$320
Total:	S\$ 1,550.11	Global Sum S\$:	
FINAL PAYMENT	Date/Time: 26.01.21	Confirm with: JUNE	Email ☐ Call ☐
Payee 1:	S\$ 1,550.11	Name 1: CHENG HOE MOTOR PTE LTD	
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	