

ASSIGNMENT

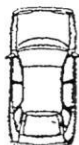
Surveyor: RASUL

DOI: 29/06/2020

Date / Time : 29/06/2020

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : GBF 7327G

Claim No. : _____

Name of Insured : CALLMIFRAME PTE LTD

Policy No. : _____

Insured Tel No. : HP:

Make / Model : _____

Excess Sec II :SS D.O.A: 24/06/2020

Place of Accident : _____

Is driver the owner? (YES / **NO**)

Nature of Accident :	
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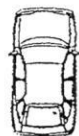
If NO, Driver Name / Age :

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

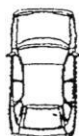
Driver Tel No. : (V/L: YES / NO)

Insured Liability :	%	Final ? Yes / No

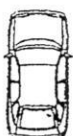
SKV 8763H



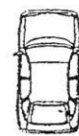
INSRS:
WSP: XINYA AUTO
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SKV 8763H : NBA/INC20006690/Y ; DOA : 24/06/2020 GBF 7327G :		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\$ 4,500.00 (7 days)	Reduction: \$3,562.08 % 44	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 18/06/2021	Confirm with KEVIN	Email ☒	Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 23	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 4,500.00			
Loss of Rental (LOR):	S\$ 856.00 (8 days)	x \$107 (W/GST)		
Loss of Use (LOU):	S\$ (\$ x days)			
Loss of Income (LOI):	S\$ (\$ x days)			
LOR only ☒	LOU only ☐	LOR + LOU ☐	LOR + LOI ☐ [Tick only one]	
GIA/LTA Search	S\$ 16.00			
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: \$400.00	
Total:	S\$ 5,372.00	Global Sum S\$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒ Call ☐	
Payee 1:	S\$ 5,372.00	Name 1: XINYA AUTO SERVICES PTE LTD		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		