

ASSIGNMENTSurveyor: **MARCUS**DOI: **03/07/2020**Date / Time : **03/07/2020**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **GW 4954S**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **03/07/2020**

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**SJP 4544T**INSRS:
WSP: **FASTECH AUTO**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SJP 4544T - CS3/AIG13022671/Apq2-1 ; 24/11/2013	Non-Reporting ltr (1st):	
	CS3/AIG13022671/Ey3w2 ; 24/11/2013	Non-Reporting ltr (2nd):	
	GW 4954S - NA/INC08015880/Ar ; 28/05/2008	Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	
		After call ltr to OI:	
		Documentation Check List:	Handler
		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/S	S\$ 5000.00 (4 days) Reduction: 11,727.40 % 70	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 22/08/2020 Confirm with LINA	Email ☒	Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 5350.00 (W/GST)		
Loss of Rental (LOR):	S\$ 480.00 (4 days) x \$120.00		
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\$ 2.00		
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\$ 5832.00	Global Sum S\$:	5800.00
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☒	Call ☐
Payee 1:	S\$ 5800.00	Name 1:	FASTECH AUTO PTE LTD
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	