

ASSIGNMENTSurveyor: **TAUFIKH**DOI: **08/07/2020**Date / Time : **08/07/2020**Registered in Merimen: **—****Pre-assign / CCU / FTE**Insured Vehicle No. : **SJK 6190T**

Claim No. : _____

Name of Insured : **TANG LAI FUN**

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** / NODriver Tel No. : _____ (V/L: **YES** / NO)Insured Liability : _____ % **Final ? Yes / No****SHC 6994G**INSRS:
WSP: **PREMIER**
Tel : **AUTOMOTIVE**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time				
	SHC 6994G - CS/EGI16021609/H1qh3n2 10/11/2016	STAGE	DATE / PIC	
	CS/FCI17005058/H1qh3n2 11/03/2017	Non-Reporting ltr (1st):		
	SJK 6190T - NA/TMI17017459/h4 08/09/2017	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: MTH	
Repair Cost:	L/S S\$ 4,750.00	(4 days) Reduction: 40 %	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 27.11.20	Confirm with SHAFAWATI	Email ☐	Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost:	w/GST S\$ 5,082.50	OID REAR ENDED TP		
Loss of Rental (LOR):	S\$ 314.58	(6 days) x \$44.94		
Loss of Use (LOU):	S\$ -	(\$ x days)		
Loss of Income (LOI):	S\$ 280.00	(\$ 40 x 6 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	
Total:	S\$ 5,679.08	Global Sum S\$:		
FINAL PAYMENT	Date/Time: 27.11.20	Confirm with: SHAFAWATI	Email ☐	Call ☐
Payee 1:	S\$ 5,679.08	Name 1:	PREMIUM AUTOMOTIVE SERVICES PTE LTD	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		