

ASSIGNMENT

Surveyor:

TAUFIKHDOI: **25/08/2020**Date / Time : **25/08/2020**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SMH 6074B**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ **D.O.A : 25/08/2020 @ 0945**

Place of Accident : _____

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

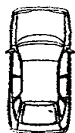
If NO, Driver Name / Age :

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

Driver Tel No. :

(V/L: YES / NO)

Insured Liability : %

Final ? Yes / No**SHD 1139L**INSRS:
WSP: **Premier Automotive Services**
Tel :
Liability
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time				
	SHD 1139L - CC3/AXA13010582/H1jb3s2-1 ; 10/06/2013 CC3/AXA13010582/H1rb3c3 ; 10/06/2013 NA/INC09019438/r ; 30/08/2009	STAGE	DATE / PIC	
		Non-Reporting ltr (1st):		
		Non-Reporting ltr (2nd):		
	SMH 6074B - X	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:	
Repair Cost: L/S	S\$ 1700.00	(3 days) Reduction: 1210.29	% 42	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 26/3/2021	Confirm with WEE DEK	Email ☒	Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 15	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 1,819.00	W/GST		
Loss of Rental (LOR):	S\$ 235.40	(4 days) x \$58.85		
Loss of Use (LOU):	S\$	(\$ x days)		
Loss of Income (LOI):	S\$ 160.00	(\$ 40 x 4 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)		
Legal Cost	S\$	2) Report Format: TP		
Total:	S\$ 2,216.40	Global Sum S\$:	3) Survey fee: \$400.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒	Call ☐
Payee 1:	S\$ 2,216.40	Name 1:	PREMIER AUTOMOTIVE SERVICES PTE LTD	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		