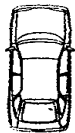


ASSIGNMENT

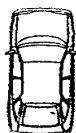
Surveyor: _____ DOI: _____ Date / Time : _____
 Registered in Merimen: _____

Pre-assign / CCU / FTE

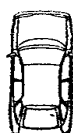
Insured Vehicle No. : **SLZ 2342X** Claim No. : **DM20HO01277/SG**
 Name of Insured : **CT STAR** Policy No. : **DMCTHQ20-000045**
 Insured Tel No. : _____ HP: _____ Make / Model : **HONDA FREED**
Excess Sec II :S\$ _____ D.O.A : **03/09/2020 07:55** Place of Accident : **SERANGOON GARDEN WAY AND BERWICK DR JUNCTION**
 Is driver the owner? (YES / NO) Nature of Accident : _____
 If **NO**, Driver Name / Age : **TOH CHIN TECK** OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO
 Driver Tel No. : _____ (V/L: YES / NO) Insured Liability : _____ % **Final ? Yes / No**

SMP 3432D

INSRS:
WSP: **Borneo Motors - Ubi**
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SMP 3432D - NA/LIP20001324/z4 ; 22.01.2020	STAGE	DATE / PIC
	SLZ 2342X - X	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: _____		
Repair Cost: P/P	S\$ 20,637.27 (6 days) Reduction: \$20,120.00 % 49	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 25/11/2020 Confirm with SAM	Email ☒	Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 22,081.88 W/GST		
Loss of Rental (LOR):	S\$ 481.50 (6 days) x \$80.25 W/GST	OI FAIL TO STOP AT STOP LINE,	
Loss of Use (LOU):	S\$ (\$ x days)	TP DRIVING STRAIGHT AT MAIN RD	
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\$ 22,565.38	Global Sum S\$:	
FINAL PAYMENT	Date/Time: _____ Confirm with: _____ Email ☒ Call ☐		
Payee 1:	S\$ 22,565.38	Name 1:	BORNEO MOTORS (SINGAPORE) PTE LTD
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	