

ASSIGNMENTSurveyor: MarcusDOI: 10/09/2020Date / Time : 10/09/2020Registered in Merimen: 10/09/2020**Pre-assign / CCU / FTE**Insured Vehicle No. : SMT 1062E

Claim No. : _____

Name of Insured : IVY ONG

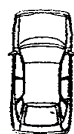
Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 09/09/2020

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****SJP 8604C**INSRS:
WSP: **TAN LIM**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SJP 8604C : CC6/AIG10017788/Ujf2r1 ; DOA : 05/09/2010	STAGE DATE / PIC
	SMT 1062E : 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: CKS
Repair Cost: L/S S\$ 2,650.00 (4 days) Reduction: 65 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 08.02.21 Confirm with SHARON	Email ☐ Call ☐
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 24		If NO or B 28, Ass. Lia :
Repair Cost: w/GST S\$ 2,835.50		OI REVERSED OUT OF PARKING LOT HIT TP
Loss of Rental (LOR): S\$ - (_____ days)		
Loss of Use (LOU): S\$ 360.00 (\$ 60 x 6 days)		
Loss of Income (LOI): S\$ ✓ (\$ _____ x _____ days)		
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LO ☐ [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: \$320
Total: S\$ 3,197.50	Global Sum S\$:	
FINAL PAYMENT	Date/Time: 08.02.21 Confirm with: SHARON	Email ☐ Call ☐
Payee 1: S\$ 3,197.50	Name 1: TAN LIM MOTOR PTE LTD	
Payee 2: (Strike if N.A.) S\$	Name 2:	
Payee 3: (Strike if N.A.) S\$	Name 3:	