

ASSIGNMENT CC6/FCI20010502/Upa3q2Surveyor: **MARCUS**DOI: **01/10/2020**Date / Time : **30/09/2020**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SHC 7180G**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$D.O.A : **27/09/2020 15:00** Place of Accident : **SUPREME COURT LANE**

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

If NO, Driver Name / Age : **CITYCAB PTE LTD**

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

Driver Tel No. : _____

(V/L: YES / NO)

Insured Liability : _____ %

Final ? Yes / No**SML 6925A**INSRS:
WSP: **YEW TEE**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time					
	SML 6925A - X			STAGE	DATE / PIC
	SHC 7180G - CC3/EQI17011489/M1wa3q2 ; 09/06/2017			Non-Reporting ltr (1st):	
	CS/FCI19003300/Ktd3n2 ; 15/02/2019			Non-Reporting ltr (2nd):	
	NS/INC09025724/Cr1 ; 12/11/2009			Non-Reporting ltr (Final):	
				Notification ltr (if non-pickup):	
				Call OI:	
				After call ltr to OI:	
05/02/2021	Pls refer to VIEWS for details.			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/sum	S\$ 3,200.00	(4 days) Reduction: 71 %	Email ☐ Call ☐		
FINAL SETTLEMENT	Date/Time: 05/02/2021	Confirm with May	Email ☒ Call ☐		
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :		
Repair Cost: w/GST	S\$ 3,424.00				
Loss of Rental (LOR):	S\$ (days)				
Loss of Use (LOU):	S\$ 300.00 (\$ 60 x 5 days)				
Loss of Income (LOI):	S\$ (\$ x days)				
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]					
GIA/LTA Search	S\$ 29.00				
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: \$500.00	
Total:	S\$ 3,753.00	Global Sum S\$: 3,750.00			
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒ Call ☐		
Payee 1:	S\$ 3,750.00	Name 1: YEW TEE AUTOMOBILE TECH PTE LTD			
Payee 2: (Strike if N.A.)	S\$	Name 2:			
Payee 3: (Strike if N.A.)	S\$	Name 3:			