

ASSIGNMENT

Surveyor:

BRYAN

DOI:

14/10/2020

Date / Time :

13/10/2020

Registered in Merimen:

Pre-assign / CCU / FTEInsured Vehicle No. : **XD 8780Z**Claim No. : **SNM20D203831**Name of Insured : **UIHENG CONSTRUCTION PTE LTD**Policy No. : **DMCVSNW00032162001**

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **11.10.2020 16:35**Place of Accident : **CHINESE CEMETERY PATH 26**

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

If NO, Driver Name / Age : **SAMYKANNU ANBALAGAN**

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

Driver Tel No. : _____ (V/L: YES / NO)

Insured Liability : % **Final ? Yes / No****SHA 7859T**INSRS:
WSP: **BIFROST**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SHA 7859T - CS/FCI18003340/Uqd3q2 - 08/02/2018	Non-Reporting ltr (1st):	
	XD 8780Z - X	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\$ 14,526.40 (6 days) Reduction: 31 %		Email ☐ Call ☐	
FINAL SETTLEMENT Date/Time: 17/6/2021	Confirm with MR YEE	Email ☒ Call ☐	
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : NA		If NO or B 28, Ass. Lia :	
Repair Cost: S\$ 15,543.25			
Loss of Rental (LOR): S\$ 751.15 (6 days) x \$125.19			
Loss of Use (LOU): S\$ _____ (\$ _____ x _____ days)			
Loss of Income (LOI): S\$ 300.00 (\$ 50 x 6 days)			
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☒ [Tick only one]			
GIA/LTA Search S\$ 7.45			
Medical: S\$ _____		1) Claim status: Normal/ Reject/Private Settle	
Disbursement: S\$ 80.00 (e.g. ☐ Tow/ ☐ Independent)		2) Report Format: TP	
Legal Cost S\$ _____		3) Survey fee: 400.00	
Total: S\$ 16,681.85	Global Sum S\$:		
FINAL PAYMENT Date/Time:	Confirm with:	Email ☐ Call ☐	
Payee 1: S\$ 16,681.85	Name 1: Bifrost Auto Pte Ltd		
Payee 2: (Strike if N.A.) S\$ _____	Name 2: _____		
Payee 3: (Strike if N.A.) S\$ _____	Name 3: _____		