

ASSIGNMENTSurveyor: **ADRIAN**DOI: **19/10/2020**Date / Time : **19/10/2020**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SJK 1192X**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :\$_____ D.O.A : **17/10/2020 12:30**Place of Accident : **CTE > CITY**

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****SBR 9138J****SJK 1192X****SLK 5521E**INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:**OI**INSRS:
WSP: **CN MOTORS**
Tel : **PTE LTD**
Liability :
RMKS: **TP**INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SLK 5521E - CC4/FCI20002567/Qba3q2 ; 11.02.2020	Non-Reporting ltr (1st):	
	SJK 1192X - CC4/AXA11007976/Ry2c3q2 ; 22.04.2011	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:	\$S\$ 4,500.00 (6 days) Reduction: 66 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 20/11/2020 Confirm with Sukyi	Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0%	
Repair Cost:	\$S\$ 4,500.00	3 veh C.C, OI was 2nd	
Loss of Rental (LOR):	\$S\$ 480.00 (4 days) x \$120		
Loss of Use (LOU):	\$S\$ - (\$ x days)		
Loss of Income (LOI):	\$S\$ - (\$ x 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\$ - (e.g. Tow/ Independent)	2) Report Format: TP	
Legal Cost	\$S\$ -	3) Survey fee: \$400	
Total:	\$S\$ 4,987.45	Global Sum \$S\$:	
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☐ Call ☐	
Payee 1:	\$S\$ 4,987.45	Name 1: CN Motors Pte Ltd	
Payee 2: (Strike if N.A.)	\$S\$	Name 2:	
Payee 3: (Strike if N.A.)	\$S\$	Name 3:	