

ASSIGNMENT

Surveyor:

Steve LimDOI: **26.10.2020**Date / Time : **26.10.2020**Registered in Merimen: **26.10.2020****Pre-assign / CCU / FTE**Insured Vehicle No. : **SLZ 3928A**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **24.10.2020 16:15**Place of Accident : **CENTRAL EXPRESSWAY**

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**SHB 6622K**INSRS:
WSP: **CDGE**
Tel : **LOYANG**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time					
	SHB 6622K - CC3/III16023928/H1eb3q2 ; 12/12/2016	STAGE	DATE / PIC		
	CS/III12007143/Rqn ; 05/04/2012	Non-Reporting ltr (1st):			
	NS/INC14007002/Scbk3 ; 10/04/2014	Non-Reporting ltr (2nd):			
	SLZ 3928A - X	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\$ 1235.00	(2 days) Reduction: 3021.68 % 71	Email ☐	Call ☐	
FINAL SETTLEMENT	Date/Time: 12/01/2021	Confirm with KAZALI	Email ☒	Call ☐	
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :		
Repair Cost:	S\$ 1321.45	W/GST			
Loss of Rental (LOR):	S\$ 375.57	(3 days)x \$125.19			
Loss of Use (LOU):	S\$ (\$ x days)				
Loss of Income (LOI):	S\$ 150.00 (\$50.00 x 3 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: \$320.00		
Total:	S\$ 1849.02	Global Sum S\$:			
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒	Call ☐	
Payee 1:	S\$ 1849.02	Name 1:	COMFORTDELGRO ENGINEERING PTE LTD		
Payee 2: (Strike if N.A.)	S\$	Name 2:			
Payee 3: (Strike if N.A.)	S\$	Name 3:			