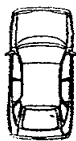


ASSIGNMENT

Surveyor:

DOI:

Date / Time : **23.10.2020**Registered in Merimen: **26.10.2020****Pre-assign / CCU / FTE**Insured Vehicle No. : **SMU 3215M**Claim No. : **9844258977SG**Name of Insured : **LIM POH LING JEANNIE**Policy No. : **2070116730**

Insured Tel No. : _____ HP: _____

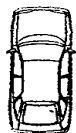
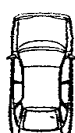
Make / Model : **NISSAN KICKS-1.2 L E-POWER (A)****Excess Sec II :S\$** _____ D.O.A : **21/10/2020 12:50**Place of Accident : **LORONG 6 TOA PAYOH CROSS JUNCTION**

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

If NO, Driver Name / Age : **FONG KAH LOCKE RAYMOND**

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

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

Insured Liability : % **Final ? Yes / No****SLU 1781U**INSRS:
WSP: **My Car**
Tel : **Consultant**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SLU 1781U - X	SMU 3215M - X	STAGE	DATE / PIC
			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
			Notification ltr (if non-pickup)	<input checked="" type="checkbox"/>
			After call ltr to OI:	<input checked="" type="checkbox"/>
			Authorisation To Act:	<input checked="" type="checkbox"/>
			Release Voucher:	<input checked="" type="checkbox"/>
			Final Repair Bill:	<input checked="" type="checkbox"/>
			Car Rental Invoice:	<input type="checkbox"/>
			Towing Invoice	<input type="checkbox"/>
			LTA / GIA :	<input checked="" type="checkbox"/>
			Medical Bill:	<input type="checkbox"/>
			PIR:	<input type="checkbox"/>
			Mandate/Reject Instruction:	<input checked="" type="checkbox"/>
			LOD	<input checked="" type="checkbox"/>
			Payment Breakdown Form:	<input type="checkbox"/>
			Post-Repair Photos:	<input type="checkbox"/>
			Others:	<input type="checkbox"/>
11/03/2021	SETTLED AND CLOSED / NO PHY FILE			

PRELIMINARY ADVICE	Date/Time:	Sent By:	
FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: L/S	S\$ 5,300.00 (5 days) Reduction: 67.87 %		Email <input type="checkbox"/> Call <input type="checkbox"/>
FINAL SETTLEMENT	Date/Time: 10/03/2021 Confirm with HUI QIN		Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :
Repair Cost: (W/GST)	S\$ 5,671.00		
Loss of Rental (LOR):	S\$ (days)		
Loss of Use (LOU):	S\$ 560.00 (\$ 80 x 7 days)		
Loss of Income (LOI):	S\$ (\$ x days)		
LOR only <input type="checkbox"/> LOU only <input checked="" type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/> [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: \$320.00
Total:	S\$ 6,238.45	Global Sum S\$: 6,000.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email <input type="checkbox"/> Call <input type="checkbox"/>
Payee 1:	S\$ 6,000.00	Name 1: MY CAR CONSULTANT PTE LTD	
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	