

ASSIGNMENTSurveyor: **KENNETH**DOI: **05/11/2020**Date / Time : **04/11/2020**Registered in Merimen: **04/11/2020****Pre-assign / CCU / FTE**Insured Vehicle No. : **SLT 2132S**

Claim No. : _____

Name of Insured : **CHONG CHUN KHAI**Policy No. : **1700065664**

Insured Tel No. : _____ HP: _____

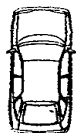
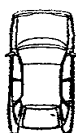
Make / Model : **MITSUBISHI SPACE STAR-1.2 CVT (A)****Excess Sec II :S\$** _____ D.O.A : **03/11/2020 11:55**Place of Accident : **JUNCTION OF WOODLANDS AVE 9 & AVE 10**

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****YQ 2562X**INSRS:
WSP: **CHENG HOE**
Tel : **MOTOR**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			STAGE	DATE / PIC
	YQ 2562X - X	SLT 2132S - X	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)	☐
			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\$ \$8,356.04 (6 days) Reduction: \$987.70 % 11		Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 26/04/2021 Confirm with JUNE		Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 5		If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 8,940.96 W/GST			
Loss of Rental (LOR):	S\$ (days)			
Loss of Use (LOU):	S\$ 420.00 (\$ 60 x 7 days)			
Loss of Income (LOI):	S\$ (\$ x days)			
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]				
GIA/LTA Search	S\$ 8.00			
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\$ 9,368.96	Global Sum S\$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒ Call ☐	
Payee 1:	S\$ 9,368.96	Name 1: Cheng Hoe Motor Pte Ltd		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		