

ASSIGNMENT

Surveyor:

KENNETH

DOI:

03/05/2021

Date / Time :

04/11/2020

Registered in Merimen:

Pre-assign / CCU / FTEInsured Vehicle No. : **SHC 899M**Claim No. : **D20004435MFSH**Name of Insured : **CITYCAB PTE LTD**Policy No. : **D-20094921MFSH**

Insured Tel No. : _____ HP: _____

Make / Model : **TOYOTA PRIUS****Excess Sec II :S\$** _____ D.O.A : **31.10.2020**Place of Accident : **BEDOK NORTH BLK 503 OPEN CARPARK**

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

If NO, Driver Name / Age : **LAU ENG CHYE**

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

Driver Tel No. : **+65-96809870**

(V/L: YES / NO)

Insured Liability : _____ %

Final ? Yes / No**SJR 5609Z**INSRS:
WSP: **CHENG**
Tel : **HOE**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time				
	SJR 5609Z- CC6/AXA12007103/Awc3z1 ; 09/04/2012	STAGE	DATE / PIC	
	NA/UOI12006938/e1 ; 09/04/2012	Non-Reporting ltr (1st):		
	SHC 899M - CC3/AIG09009139/Fj ; 24/04/2009	Non-Reporting ltr (2nd):		
	CC3/AIG14015282/H1wy3w2 ; 09/08/2014	Non-Reporting ltr (Final):		
	CC3/L CR17020120/K1pb3q2 ; 17/10/2017	Notification ltr (if non-pickup):		
	CS3/FCI16003939/K1vbc2 ; 13/12/2015	Call OI:		
	CS3/FCI18012277/Gz4d3s2 ; 29/06/2018	After call ltr to OI:		
	NS/INC10002897/Fg1 ; 09/02/2010	Documentation Check List: Handler Typist		
	NS/INC15021479/H1vbn2 ; 13/12/2015	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: L/S	S\$ \$2,600.00 (3 days) Reduction: \$1,634.70 % 39	Email ☐	Call ☐	
FINAL SETTLEMENT	Date/Time: 16/11/2021	Confirm with: JUNE	Email ☒	Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 26	If NO or B 28, Ass. Lia :		
Repair Cost:	S\$ 2,782.00 W/GST			
Loss of Rental (LOR):	S\$ (days)			
Loss of Use (LOU):	S\$ 240.00 (\$ 60 x 4 days)			
Loss of Income (LOI):	S\$ (\$ x days)			
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]				
GIA/LTA Search	S\$			
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: \$350.00		
Total:	S\$ 3,022.00	Global Sum S\$:	3,000.00	
FINAL PAYMENT	Date/Time: _____	Confirm with: _____	Email ☒	Call ☐
Payee 1:	S\$ 3,000.00	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:		