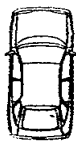


ASSIGNMENT**CC3/AG20012395/R1pa3**

Surveyor:

RasulDOI: **01/12/2020**Date / Time : **11/11/2020**Registered in Merimen: **11/11/2020****Pre-assign / CCU / FTE**Insured Vehicle No. : **SMV 1659Z**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **09/11/2020 21:20**Place of Accident : **CHOA CHU KANG AVE 4**

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

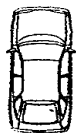
If NO, Driver Name / Age :

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

Driver Tel No. :

(V/L: YES / NO)

Insured Liability : %

Final ? Yes / No**SMF 3359K**INSRS:
WSP: **PERFORMANCE**
Tel : **MOTORS LTD**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SMF3359K - x	SMV 1659Z - 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 Typist
19/01/2021	Pls refer to VIEWS for details.		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\$ 3,997.40	(3 days) Reduction: 45	%	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 19/01/2021	Confirm with Caroline	Email ☒	Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost: w/GST	S\$ 4,277.22			
Loss of Rental (LOR): w/GST	S\$ 385.20	(3 days) x \$120.00		
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\$ 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\$ 4,664.42	Global Sum S\$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒	Call ☐
Payee 1:	S\$ 4,662.42	Name 1:	Performance Motors Limited	
Payee 2: (Strike if N.A.)	S\$ 4,664.42	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		