

ASSIGNMENTSurveyor: MarcusDOI: 25/11/2020Date / Time : 25/11/2020Registered in Merimen: 25/11/2020**Pre-assign / CCU / FTE**Insured Vehicle No. : SFX 1002R

Claim No. : _____

Name of Insured : TOH PENG PENG

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 25/11/2020

Place of Accident : _____

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

If NO, Driver Name / Age : _____

OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NODriver Tel No. : _____ (V/L: ☒ YES / NO)Insured Liability : _____ % **Final ? Yes / No**SJQ 4573D → _____ → _____ → _____ → _____INSRS:
WSP: STYTECH
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SJQ 4573D : <u>NA/CTI20012998/z4 ; DOA : 25/11/2020</u>	STAGE DATE / PIC
	SFX 1002R :	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
		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: <u>L/S</u> S\$ <u>3200.00</u> (<u>4</u> days) Reduction: <u>\$3,004.88</u> % <u>48</u>		Email ☐ Call ☐
FINAL SETTLEMENT Date/Time: <u>06/04/2021</u>	Confirm with <u>WINSTON</u>	Email ☒ Call ☐
Final Liability: % <u>100</u> (Agreed / Assessed) BOLA S/N No. : <u>NIL</u>		If NO or B 28, Ass. Lia :
Repair Cost: S\$ <u>3,424.00</u> <u>W/GST</u>		
Loss of Rental (LOR): S\$ <u>428.00</u> (<u>4</u> days) x \$107 <u>W/GST</u>		OI CHARGED FOR CARELESS DRIVING
Loss of Use (LOU): S\$ (\$ x days)		
Loss of Income (LOI): S\$ (\$ x days)		
LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LO ☐ [Tick only one]		
GIA/LTA Search S\$ <u>2.00</u>		
Medical: S\$		1) Claim status: <u>Normal</u> /Reject/Private Settle
Disbursement: S\$ (e.g. Tow/ Independent)		2) Report Format: <u>TP</u>
Legal Cost S\$		3) Survey fee: <u>\$320.00</u>
Total: S\$ <u>3,854.00</u>	Global Sum S\$:	
FINAL PAYMENT Date/Time:	Confirm with:	Email ☒ Call ☐
Payee 1: S\$ <u>3,854.00</u>	Name 1: <u>STYTECH AUTO PTE LTD</u>	
Payee 2: (Strike if N.A.) S\$	Name 2:	
Payee 3: (Strike if N.A.) S\$	Name 3:	