

ASSIGNMENT

Surveyor:

MARCUSDOI: **26/11/2020**Date / Time : **26/11/2020**Registered in Merimen: **26/11/2020****Pre-assign / CCU / FTE**Insured Vehicle No. : **SKU 1199M**

Claim No. :

Name of Insured :

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 :

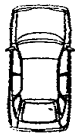
Driver Tel No. :

(V/L: YES / NO)

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

Insured Liability :

%

Final ? Yes / No**SHA 4495D**

INSRS:

WSP:

Tel :

Liability:

RMKS:

**CDGE
LOYANG**

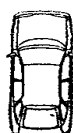
INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time		STAGE	DATE / PIC
	SHA 4495D - CC3/AXA13000124/H1v1f3c3 ; 30.12.2012	Non-Reporting ltr (1st):	
	SKU 1199M - X	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: CKS
Repair Cost: P/P	S\$ 1,411.12	(2 days) Reduction: 24 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 19.04.21	Confirm with CATHERINE	Email ☐ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0%
Repair Cost: w/GST	S\$ 1,509.90	3VEH CC OI 2ND	
Loss of Rental (LOR):	S\$ 312.98	(2.5 days) x \$125.19	
Loss of Use (LOU):	S\$ -	(\$ x days)	
Loss of Income (LOI):	S\$ 125.00	(\$ 50 x 2.5 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/Prints/Settle
Disbursement:	S\$ -	(e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S\$ -		3) Survey fee: \$400
Total:	S\$ 1,949.88	Global Sum S\$: 1,900.00	
FINAL PAYMENT	Date/Time: 19.04.21	Confirm with: CATHERINE	Email ☐ Call ☐
Payee 1:	S\$ 1,900.00	Name 1: COMFORTDELGRO ENGINEERING PTE LTD	
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	