

ASSIGNMENTSurveyor: XING GUO QIANGDOI: 14/12/2020Date / Time : 01/12/2020Registered in Merimen: 01/12/2020**Pre-assign / CCU / FTE**Insured Vehicle No. : GBK 6831YClaim No. : 9470884947SG

Name of Insured : _____

Policy No. : 2070143292

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : \$ _____ D.O.A : 26/11/2020 13:00Place of Accident : ALONG TPE TOWARDS ECP

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

XE 4261BINSRS: SC AUTO
WSP: INDUSTRIES
Tel : (S) PTE LTD
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time				
	<u>XE 4261B - X</u>	<u>GBK 6831Y - X</u>	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
			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: <u>XGQ</u>	
Repair Cost: <u>P/P</u>	S\$ <u>2,060.00</u>	(<u>2</u> days) Reduction: <u>46</u> %	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: <u>05.04.22</u>	Confirm with <u>HAMIMAH</u>	Email ☐	Call ☐
Final Liability:	% <u>100</u>	(Agreed / Assessed) BOLA S/N No. : <u>15</u>	If NO or B 28, Ass. Lia :	
Repair Cost: <u>w/GST</u>	S\$ <u>2,204.20</u>	<u>OI CHANGED LANE HIT TP</u>		
Loss of Rental (LOR):	S\$ <u>-</u>	(<u> </u> days)		
Loss of Use (LOU):	S\$ <u>450.00</u>	(\$ <u>150</u> x <u>3</u> days)		
Loss of Income (LOI):	S\$ <u>-</u>	(\$ <u> </u> x <u> </u> days)		
LOR only ☐	LOU only ☒	LOR + LOU ☐	[Tick only one]	
GIA/LTA Search	S\$ <u>7.45</u>			
Medical:	S\$ <u>-</u>			
Disbursement:	S\$ <u>-</u>	(e.g. Tow/ Independent)	1) Claim status: Normal/ Reject Private Secde	
Legal Cost	S\$ <u>-</u>		2) Report Format: <u>TP</u>	
			3) Survey fee: <u>\$320</u>	
Total:	S\$ <u>2,661.65</u>	Global Sum S\$: <u>2,660.00</u>		
FINAL PAYMENT	Date/Time: <u>05.04.22</u>	Confirm with: <u>HAMIMAH</u>	Email ☐	Call ☐
Payee 1:	S\$ <u>2,660.00</u>	Name 1:	<u>SC AUTO INDUSTRIES (S) PTE LTD</u>	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		