

ASSIGNMENT

Surveyor: Bryan DOI: 10/12/2020 Date / Time : 10/12/2020
 Registered in Merimen: ---

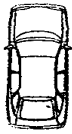
Pre-assign / CCU / FTEInsured Vehicle No. : PC 4122AClaim No. : SNM20D204736Name of Insured : CHAN BUS SERVICESPolicy No. : DMB1SNW00005112004

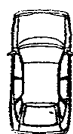
Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 08/12/2020

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**YP 9050R
 INSRs:
 WSP: **JWG**
 Tel :
 Liability :
 RMKS:

 INSRs:
 WSP:
 Tel :
 Liability :
 RMKS:

 INSRs:
 WSP:
 Tel :
 Liability :
 RMKS:

 INSRs:
 WSP:
 Tel :
 Liability :
 RMKS:

Date/ Time			STAGE	DATE / PIC
	YP 9050R : X	PC 4122A : X	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:	
Repair Cost: L/SUM	S\$ 7,500.00	(9 days) Reduction: 82 %	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 22/4/2021	Confirm with JWG	Email ☒	Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 8	If NO or B 28, Ass. Lia :	0
Repair Cost:	S\$ 8,025.00			
Loss of Rental (LOR):	S\$ 1,800.00	(10 days) x \$180.00		
Loss of Use (LOU):	S\$ (\$ x days)			
Loss of Income (LOI):	S\$ (\$ x days)			
LOR only ☒	LOU only ☐	LOR + LOU ☐	[Tick only one]	
GIA/LTA Search	S\$ 36.45			
Medical:	S\$		1) Claim status: Normal/Reject/Private Settlement	
Disbursement:	S\$	(e.g. Tow/ Independent)	2) Report Format: TP	
Legal Cost	S\$		3) Survey fee: 320.00	
Total:	S\$ 9,861.45	Global Sum S\$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐	Call ☐
Payee 1:	S\$ 9,861.45	Name 1: JWG INTERNATIONAL PTE. LTD		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		