

ASSIGNMENTSurveyor: AdrianDOI: 10/12/2020Date / Time : 11/12/2020Registered in Merimen: 11/12/2020**Pre-assign / CCU / FTE**Insured Vehicle No. : SKZ 7662BClaim No. : 3393650891SGName of Insured : ISHAK BIN ISMAILPolicy No. : 2000004392

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 27/11/2020

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 / NO

Driver Tel No. : _____ (V/L: YES / NO)

Insured Liability : % **Final ? Yes / No**SMP 3467DINSRS:
WSP: **KANG CAR**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SMP 3467D : X ; SKZ 7662B : X		STAGE	DATE / PIC
15/12/2020	- OINR *** SENT OUT FIRST NON-REPORTING LETTER		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: LWP	
Repair Cost: L/S S\$ 4,200.00 (6 days) Reduction: 40 %			Email ☐ Call ☐	
FINAL SETTLEMENT Date/Time: 02.06.22 Confirm with: SHARON			Email ☐ Call ☐	
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27			If NO or B 28, Ass. Lia :	
Repair Cost: w/GST S\$ 4,494.00			OID REAR ENDED TP	
Loss of Rental (LOR): S\$ - (_____ days)				
Loss of Use (LOU): S\$ 700.00 (\$ 100 x 7 days)				
Loss of Income (LOI): S\$ - (\$ _____ x _____ days)				
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LO ☐ [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	
Total: S\$ 5,196.00			Global Sum S\$:	
FINAL PAYMENT Date/Time: 02.06.22 Confirm with: SHARON			Email ☐ Call ☐	
Payee 1: S\$ 5,196.00 Name 1: KANG CAR REPAIRERS PTE LTD				
Payee 2: (Strike if N.A.) S\$ _____ Name 2: _____				
Payee 3: (Strike if N.A.) S\$ _____ Name 3: _____				