

ASSIGNMENT

Surveyor:

Kenneth

DOI:

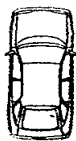
14/12/2020

Date / Time :

11/12/2020

Registered in Merimen:

14/12/2020

Pre-assign / CCU / FTEInsured Vehicle No. : **SFY 8759P**Claim No. : **0475274046SG**

Name of Insured : _____

Policy No. : **1900078904**

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : \$ _____ D.O.A : **04/12/2020 18:10**Place of Accident : **SLE > CTWE (CITY) NEAR LENTOR EXIT**

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

If NO, Driver Name / Age :

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

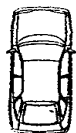
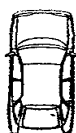
Driver Tel No. :

(V/L: YES / NO)

Insured Liability :

%

Final ? Yes / No

SFY 8759P**SKJ 5978M****SLW 9398E**INSRS:
WSP:
Tel :
Liability :
RMKS: **OI**INSRS:
WSP:
Tel : **RICARDO**
Liability :
RMKS: **TP**INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SKJ 5978M - X		
	SFY 8759P - NA/TIC09007989/r ; 14.04.2009		
		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:	☐ ☐
		Post-Repair Photos:	☐ ☐
		Others:	☐ ☐
PRELIMINARY ADVICE	Date/Time:	Sent By:	
FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: P/P	S\$ 5,908.11 (4 days) Reduction: 50 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 01/06/2022 Confirm with Grace		Email ☒ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28		If NO or B 28, Ass. Lia : 100
Repair Cost: w/GST	S\$ 6,321.68		
Loss of Rental (LOR):	S\$ 400.00 (4 days) X\$100		
Loss of Use (LOU):	S\$ (\$ x days)		
Loss of Income (LOI):	S\$ (\$ x days)		
LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]			
GIA/LTA Search	S\$ 7.45		
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: \$320.00
Total:	S\$ 6,729.13	Global Sum S\$: 6,000.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒ Call ☐
Payee 1:	S\$ 6,000.00	Name 1: Ricardo Auto Centre Pte Ltd	
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	