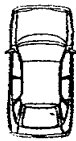


ASSIGNMENT

CC3/AIG20013775/Upa3

Surveyor: MarcusDOI: 17/12/2020Date / Time : 14/12/2020Registered in Merimen: 14/12/2020**Pre-assign / CCU / FTE**Insured Vehicle No. : GBF 78X

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 11/12/2020 13:25

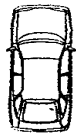
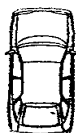
Place of Accident : _____

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**SML 6949GINSRS:
WSP: **PREMIUM**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time																																			
	SML 6949G - X	GBF 78X - X	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: <table border="1"> <thead> <tr> <th>Handler</th> <th>Typist</th> </tr> </thead> <tbody> <tr><td>Notification ltr (if non-pickup)</td><td>☐</td></tr> <tr><td>After call ltr to OI:</td><td>☐</td></tr> <tr><td>Authorisation To Act:</td><td>☐</td></tr> <tr><td>Release Voucher:</td><td>☐</td></tr> <tr><td>Final Repair Bill:</td><td>☐</td></tr> <tr><td>Car Rental Invoice:</td><td>☐</td></tr> <tr><td>Towing Invoice</td><td>☐</td></tr> <tr><td>LTA / GIA :</td><td>☐</td></tr> <tr><td>Medical Bill:</td><td>☐</td></tr> <tr><td>PIR:</td><td>☐</td></tr> <tr><td>Mandate/Reject Instruction:</td><td>☐</td></tr> <tr><td>LOD</td><td>☐</td></tr> <tr><td>Payment Breakdown Form:</td><td>☐</td></tr> <tr><td>Post-Repair Photos:</td><td>☐</td></tr> <tr><td>Others:</td><td>☐</td></tr> </tbody> </table>	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:	☐
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Payment Breakdown Form:	☐																																		
Post-Repair Photos:	☐																																		
Others:	☐																																		
14/04/2021	Pls refer to VIEWS for details.																																		
PRELIMINARY ADVICE Date/Time: _____ Sent By: _____																																			
FINALIZATION Date/Time: _____ Confirm with: _____ Confirm by: _____																																			
Repair Cost: P/P	S\$ 2,696.00	(3 days) Reduction: 76 %	Email ☐ Call ☐																																
FINAL SETTLEMENT Date/Time: 14/04/2021 Confirm with Nadia Email ☒ Call ☐																																			
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :																																
Repair Cost: W/GST	S\$ 2,884.72																																		
Loss of Rental (LOR):	S\$ 450.00	(3 days) x \$150.00																																	
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\$ 3,342.17	Global Sum S\$:																																	
FINAL PAYMENT Date/Time: _____ Confirm with: _____ Email ☒ Call ☐																																			
Payee 1:	S\$ 3,342.17	Name 1: Premium Automobiles Pte Ltd																																	
Payee 2: (Strike if N.A.)	S\$	Name 2:																																	
Payee 3: (Strike if N.A.)	S\$	Name 3:																																	