

ASSIGNMENTSurveyor: STEVEDOI: 30/12/2020Date / Time : 23/12/2020Registered in Merimen: 23/12/2020**Pre-assign / CCU / FTE**Insured Vehicle No. : SGD 7088YClaim No. : 8749188199SG

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : \$ _____ D.O.A : 15/12/2020 10:30Place of Accident : BRADDELL RD

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**YL 1978MINSRS:
WSP: JIN QUAN
Tel : ENGINEERING
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	<u>YL 1978M - NA/INC08011257/w1 ; 05.04.2008</u>	Non-Reporting ltr (1st):	
	<u>SGD 7088Y - CS/OAC08024791/Uhg1 ; 05.09.2008</u>	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: <u>CTY</u>	
Repair Cost: <u>L/S</u> S\$ <u>14,000.00</u> (<u>15</u> days) Reduction: <u>43</u> %		Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: <u>22.06.22</u> Confirm with <u>GOH</u>	Email ☐ Call ☐	
Final Liability: % <u>100</u> (Agreed / Assessed) BOLA S/N No. : <u>27</u>		If NO or B 28, Ass. Lia :	
Repair Cost: <u>w/GST</u> S\$ <u>14,980.00</u>		<u>OID REAR ENDED TP</u>	
Loss of Rental (LOR): S\$ <u>-</u> (_____ days)			
Loss of Use (LOU): S\$ <u>2,000.00</u> (\$ <u>100</u> x <u>20</u> days)			
Loss of Income (LOI): S\$ <u>✓ -</u> (\$ _____ x _____ days)			
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]			
GIA/LTA Search S\$ <u>-</u>			
Medical: S\$ <u>-</u>		1) Claim status: Normal/ Reject/Printed Settle	
Disbursement: S\$ <u>-</u> (e.g. Tow/ Independent)		2) Report Format: <u>TP</u>	
Legal Cost S\$ <u>-</u>		3) Survey fee: <u>\$320</u>	
Total: S\$ <u>16,980.00</u>	Global Sum S\$: <u>16,900.00</u>		
FINAL PAYMENT	Date/Time: <u>22.06.22</u> Confirm with: <u>GOH</u>	Email ☐ Call ☐	
Payee 1: S\$ <u>16,900.00</u>	Name 1: <u>JIN QUAN ENGINEERING PLTE LTD</u>		
Payee 2: (Strike if N.A.) S\$ _____	Name 2: _____		
Payee 3: (Strike if N.A.) S\$ _____	Name 3: _____		