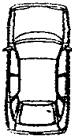


ASSIGNMENTSurveyor: MARCUSDOI: 27/01/2021Date / Time : 15/01/2021Registered in Merimen: 15/01/2021**Pre-assign / CCU / FTE**Insured Vehicle No. : SCX 220U

Claim No. : _____

Name of Insured : TAN KHOON HUI JOHNNY

Policy No. : _____

Insured Tel No. : _____ HP: _____

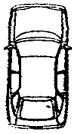
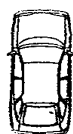
Make / Model : _____

Excess Sec II : \$ _____ D.O.A : 26/12/2021

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**SKH 1091H → _____ → _____ → _____ → _____INSRS:
WSP: JIN AUTO
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SKH 1091H : X ; SCX 220U : 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:	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:	☐
			Post-Repair Photos:	☐
			Others:	☐
PRELIMINARY ADVICE	Date/Time:	Sent By:		
FINALIZATION	Date/Time:	Confirm with:	Confirm by:	
Repair Cost: <u>L/S</u>	\$S <u>1,900.00</u>	(<u>2</u> days) Reduction: <u>43.15</u> %	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: <u>18/06/2021</u>	Confirm with <u>JOUIS</u>	Email ☒	Call ☐
Final Liability:	% <u>50</u>	(Agreed / Assessed) BOLA S/N No. : <u>24(a)</u>	If NO or B 28, Ass. Lia :	
Repair Cost (w/GST) <u>2,033.00</u>	\$S <u>1,016.50</u>			
Loss of Rental (LOR):	\$S (_____ days)			
Loss of Use (LOU): <u>200</u>	\$S <u>100</u> (\$ <u>100</u> x <u>2</u> days)			
Loss of Income (LOI):	\$S (_____ x _____ days)			
LOR only ☐ LOU only ☒	LOR + LOU ☐ LOR + LO ☐ [Tick only one]			
GIA/LTA Search	\$S			
Medical:	\$S			
Disbursement:	\$S (e.g. Tow/ Independent)			
Legal Cost	\$S <u>1,116.50</u>			
Total:	\$S <u>1,116.50</u>	Global Sum \$S: <u>1,050.00</u>		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐	Call ☐
Payee 1:	\$S <u>1,050.00</u>	Name 1: <u>Jin Auto Services Pte Ltd</u>		
Payee 2: (Strike if N.A.)	\$S	Name 2:		
Payee 3: (Strike if N.A.)	\$S	Name 3:		

23/06/2021 SETTLED AND CLOSED / NO PHY FILE

1) Claim status: Normal/Reject/Private Settle

2) Report Format: TP3) Survey fee: \$320.00