

ASSIGNMENTSurveyor: OSPDOI: 18/01/2021Date / Time : 20/01/2021Registered in Merimen: 20/01/2021**Pre-assign / CCU / FTE**Insured Vehicle No. : GW 886G

Claim No. : _____

Name of Insured : HT ELECTRIC PTE LTD

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 16/01/2021

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****SHC 4576T**INSRS:
WSP: **SMRT**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SHC 4576T : NS/INC16000581/K1qbc2 ; DOA : 09/01/2016	STAGE DATE / PIC
	GW 886G : CC6/AIG21000959/Uba3 ; DOA : 16/01/2021	Non-Reporting ltr (1st):
		Non-Reporting ltr (2nd):
		Non-Reporting ltr (Final):
		Notification ltr (if non-pickup):
		Call OI:
		After call ltr to OI:
24/05/2021	Pls refer to Views for details.	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: _____
Repair Cost: L/sum	S\$ 5,100.00 (5 days) Reduction: 83 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 24/05/2021 Confirm with Lee Gek	Email ☒ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28g	If NO or B 28, Ass. Lia : 100
Repair Cost:	S\$ 5,100.00	
Loss of Rental (LOR):	S\$ 802.50 (6 days) x\$133.75	
Loss of Use (LOU):	S\$ (\$ x days)	
Loss of Income (LOI):	S\$ (\$ x days)	
LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LO ☐ [Tick only one]		
GIA/LTA Search	S\$ 7.00	
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: \$320.00
Total:	S\$ 5,909.50 Global Sum S\$: 5,900.00	
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☒ Call ☐
Payee 1:	S\$ 5,900.00 Name 1: SMRT Taxis Pte Ltd	
Payee 2: (Strike if N.A.)	S\$ Name 2: _____	
Payee 3: (Strike if N.A.)	S\$ Name 3: _____	