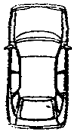


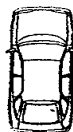
ASSIGNMENTSurveyor: KennethDOI: 05/02/2021Date / Time : 04/02/2021Registered in Merimen: 04/02/2021**Pre-assign / CCU / FTE**

Insured Vehicle No. : GBK 8166X
 Name of Insured : Metaquip TC Industrial Pte Ltd
 Insured Tel No. : _____ HP: _____
Excess Sec II :S\$ _____ D.O.A : 03/02/2021

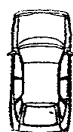
Claim No. : _____
 Policy No. : _____
 Make / Model : _____
 Place of Accident : _____

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**GBJ 1507Y

INSRS:
WSP: GUAN MOTOR
Tel : _____
Liability : _____
RMKS: _____



INSRS:
WSP: _____
Tel : _____
Liability : _____
RMKS: _____



INSRS:
WSP: _____
Tel : _____
Liability : _____
RMKS: _____



INSRS:
WSP: _____
Tel : _____
Liability : _____
RMKS: _____

Date/ Time		
	GBJ 1507Y : X	STAGE DATE / PIC
	GBK 8166X : CC4/AIG21001701/Krs3 ; DOA : 03/02/2021	Non-Reporting ltr (1st):
		Non-Reporting ltr (2nd):
		Non-Reporting ltr (Final):
		Notification ltr (if non-pickup):
		Call OI:
		After call ltr to OI:
		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\$ 10,500.00 (12 days) Reduction: 26 %		Email ☐ Call ☐
FINAL SETTLEMENT Date/Time: 14.10.2021	Confirm with PANG	Email ☒ Call ☐
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :
Repair Cost: S\$ 10,500.00		
Loss of Rental (LOR): S\$ 1,800.00 (18 days) x \$100.00		
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\$ 7.49		
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\$ 12,307.49	Global Sum S\$:	
FINAL PAYMENT Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1: S\$ 12,307.49	Name 1: Guan Motor Works	
Payee 2: (Strike if N.A.) S\$	Name 2:	
Payee 3: (Strike if N.A.) S\$	Name 3:	