

Surveyor:

ADRIAN

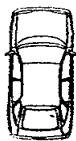
DOI:

10/02/2021

Date / Time : 10/02/2021

Registered in Merimen:

ASSIGNMENT

Pre-assign / CCU / FTE

Insured Vehicle No. : GZ 8052C

Claim No. :

Name of Insured :

Policy No. :

Insured Tel No. : HP:

Make / Model :

Excess Sec II :S\$ D.O.A: 10.02.2021

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 / NO

Driver Tel No. :

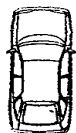
(V/L: YES / NO)

Insured Liability :

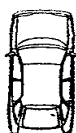
%

Final ? Yes / No

SLH 2578C



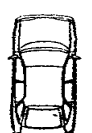
INRS:
WSP: : **Ryder Auto**
Tel : **workshop**
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			STAGE	DATE / PIC
	SLH 2578C NA/INC21001995/h4 ; 10.02.2021		Non-Reporting ltr (1st):	
	GZ 8052C - NJA/INC08025379/T1y1 ; 12.09.2008		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\$ 8,900.00 (9 days) Reduction: 36 % Email ☐ Call ☐				
FINAL SETTLEMENT Date/Time:02/02/2023 Confirm with Zeph Email ☒ Call ☐				
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27 If NO or B 28, Ass. Lia :				
Repair Cost: w/GST S\$ 9,523.00				
Loss of Rental (LOR): S\$ 900.00 (9 days) X \$100				
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\$ 36.45				
Medical: S\$				
Disbursement: S\$ 120.00 (e.g. Tow/ Independent)				
Legal Cost S\$				
1) Claim status: Normal/Reject/Private Settle				
2) Report Format: TP				
3) Survey fee: \$400.00				
Total: S\$ 10,579.45 Global Sum S\$:				
FINAL PAYMENT Date/Time: Confirm with: Email ☒ Call ☐				
Payee 1: S\$ 10,579.45 Name 1: Ryder Auto Pte Ltd				
Payee 2: (Strike if N.A.) S\$ Name 2:				
Payee 3: (Strike if N.A.) S\$ Name 3:				