

ASSIGNMENTSurveyor: ADRIANDOI: 19/02/2021Date / Time : 19/02/2021Registered in Merimen: 19/02/2021**Pre-assign / CCU / FTE**Insured Vehicle No. : SMK 9319K

Claim No. : _____

Name of Insured : FUN SUE LYNPolicy No. : 2070051041

Insured Tel No. : _____ HP: _____

Make / Model : Hyundai AvanteExcess Sec II :\$ _____ D.O.A : 07/02/2021 13:34Place of Accident : TOH GUAN ROAD LEADING INTO PIE (TUAS) EXIT 30

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**SMW 2598DINSRS:
WSP: SK Automobile
Tel : Pte Ltd.
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SMW 2598D - X	Non-Reporting ltr (1st):	
	SMK 9319K - NBA/MSG19020987/Y ; 23.11.2019	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:	☐ ☐
		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>2,400.00</u> (<u>2</u> days) Reduction: <u>68.97</u> %	Email ☒ Call ☐	
FINAL SETTLEMENT	Date/Time: <u>01/06/2021</u> Confirm with <u>TOH GUAN</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: (W/GST)	S\$ <u>2,568.00</u>		
Loss of Rental (LOR): (W/GST)	S\$ <u>428.00</u> (<u>4</u> 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 + LOI ☐ [Tick only one]			
GIA/LTA Search	S\$ <u>2.00</u>		
Medical:	S\$	1) Claim status: Normal/Reject/Private Settle	
Disbursement:	S\$ (e.g. Tow/ Independent)	2) Report Format: <u>TP</u>	
Legal Cost	S\$	3) Survey fee: <u>\$320.00</u>	
Total:	S\$ <u>2,998.00</u> Global Sum S\$: 2,900.00		
FINAL PAYMENT	Date/Time: _____ Confirm with: _____ Email ☐ Call ☐		
Payee 1:	S\$ <u>2,900.00</u> Name 1: <u>SK Automobile Pte Ltd</u>		
Payee 2: (Strike if N.A.)	S\$ Name 2:		
Payee 3: (Strike if N.A.)	S\$ Name 3:		