

ASSIGNMENT

Surveyor:

MR. LIM

DOI:

03/03/2021

Date / Time :

03.03.2021

Registered in Merimen:

03.03.2021**Pre-assign / CCU / FTE**Insured Vehicle No. : **SJR 1156P**

Claim No. :

Name of Insured : **TAN BOON AI**

Policy No. :

1900016098

Insured Tel No. : _____ HP: _____

Make / Model :

MAZDA 6

Excess Sec II :S\$

D.O.A : **27.02.2021 15:45**Place of Accident : **400 Balestier Rd, Singapore 329802**

Is driver the owner? (YES / NO) Nature of Accident :

If NO, Driver Name / Age : **ALVIN TAN MENG WEI**

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

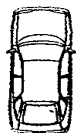
Driver Tel No. :

(V/L: YES / NO)

Insured Liability :

%

Final ? Yes / No

SLA 8858S

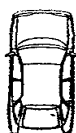
INSRS:

WSP:

Tel :

Liability :

RMKS:

**TEAM
AUTOPRO**

INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time	SLA 8858S - X	SJR 1156P - 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 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:	☐ ☐
03/06/2021	SETTLED AND CLOSED / NO PHY FILE			
PRELIMINARY ADVICE	Date/Time:	Sent By:		
FINALIZATION	Date/Time:	Confirm with:	Confirm by:	
Repair Cost: L/S	S\$ 5,350.00 (6 days) Reduction: 82.55 %		Email ☒ Call ☐	
FINAL SETTLEMENT	Date/Time: 31/05/2021 Confirm with ADEL		Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :	
Repair Cost: (W/GST)	S\$ 5,724.50			
Loss of Rental (LOR):(W/GST)	S\$ 1,348.20 (7 days) X \$180.00			
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\$ 7.45			
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\$ 7,080.15	Global Sum S\$: 6,800.00		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐	
Payee 1:	S\$ 6,800.00	Name 1: TEAM AUTOPRO PTE LTD		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		