

ASSIGNMENTSurveyor: **MARCUS**DOI: **05/03/2021**Date / Time : **05/03/2021**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SKR 3579C**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :\$ _____ D.O.A : **03/03/2021**

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

SMA 8952RINSRS:
WSP: **SOON SAN**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SMA 8952R		
	SKR 3579C		
	- NA/INC21002940/h4 ; 03.03.2021		
		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:	☐
		Post-Repair Photos:	☐
		Others:	☐
PRELIMINARY ADVICE	Date/Time: _____	Sent By: _____	
FINALIZATION	Date/Time: _____	Confirm with: _____	Confirm by: CKS
Repair Cost: L/S	\$S\$ 7,800.00	(8 days) Reduction: 53 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 26.04.21	Confirm with VINCENT	Email ☐ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	\$S\$ 7,800.00	OID REAR ENDED TP	
Loss of Rental (LOR):	\$S\$ 1,440.00	(12 days) X \$120	
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\$ -		
Medical:	\$S\$ -		
Disbursement:	\$S\$ -	(e.g. Tow/ Independent)	1) Claim status: Normal/ Reject/Private Settle
Legal Cost	\$S\$ -		2) Report Format: TP
			3) Survey fee: \$400
Total:	\$S\$ 9,240.00	Global Sum S\$:	
FINAL PAYMENT	Date/Time: 26.04.21	Confirm with: VINCENT	Email ☐ Call ☐
Payee 1:	\$S\$ 9,240.00	Name 1: SOON SAN MOTOR TRADING	
Payee 2: (Strike if N.A.)	\$S\$	Name 2:	
Payee 3: (Strike if N.A.)	\$S\$	Name 3:	