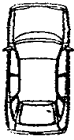


ASSIGNMENT

Surveyor: RASUL DOI: 10/03/2021 Date / Time : 07/03/2021
 Registered in Merimen: 07/03/2021

Pre-assign / CCU / FTE

Insured Vehicle No. : SME 9004A
 Name of Insured : Ang Soon Loong (Hong Shunloong)

Claim No. : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 04/03/2021

Place of Accident : _____

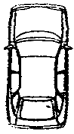
Is driver the owner? (☒ YES / NO) Nature of Accident : _____

If NO, Driver Name / Age : _____

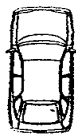
OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NO

Driver Tel No. : _____ (V/L: ☒ YES / NO)

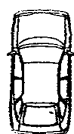
Insured Liability : _____ % **Final ? Yes / No**

SMX 1436P

INSRS:
WSP: VOLKSWAGEN
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SMX 1436P : X ; SME 9004A : X	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: <u>P/P</u>	S\$ <u>2,220.00</u>	(<u>3</u> days)	Reduction: <u>71</u> %	Email ☐	Call ☐	
FINAL SETTLEMENT		Date/Time: <u>12/05/2021</u>	Confirm with: <u>Meiy</u>	Email ☒	Call ☐	
Final Liability:	% <u>100</u>	(Agreed / Assessed)	BOLA S/N No. : <u>23</u>	If NO or B 28, Ass. Lia :		
Repair Cost: <u>w/GST</u>	S\$ <u>2,375.40</u>					
Loss of Rental (LOR): <u>w/GST</u>	S\$ <u>385.20</u>	(<u>3</u> days)	x \$120.00			
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\$ <u>2.00</u>					
Medical:	S\$	1) Claim status: Normal/ Reject/Private Settle				
Disbursement:	S\$	(e.g. Tow/ Independent)				
Legal Cost	S\$	2) Report Format: <u>TP</u>				
		3) Survey fee: <u>\$320.00</u>				
Total:	S\$ <u>2,762.60</u>	Global Sum S\$:				
FINAL PAYMENT		Date/Time:	Confirm with:	Email ☒	Call ☐	
Payee 1:	S\$ <u>2,377.40</u>	Name 1:	<u>Volkswagen Group Singapore Pte Ltd</u>			
Payee 2: (Strike if N.A.)	S\$ <u>385.20</u>	Name 2:	<u>BKW Rent A Car Pte Ltd</u>			
Payee 3: (Strike if N.A.)	S\$	Name 3:				