

ASSIGNMENT

Surveyor:

BRYAN

DOI: 11/03/2021

Date / Time : 10/03/2021

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SMW 305X**Claim No. : **SNM21D201380**Name of Insured : **KINETIC AUTO PREMIER PTE LTD**Policy No. : **DMHCSNA00003492000**

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **10/03/2021 08:15**Place of Accident : **CHANGI NORTH STREET 1**

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**SHC 1528C**INSRS:
WSP: **BIFROST**
Tel : **AUTO**
Liability : **PTE LTD**
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			STAGE	DATE / PIC
	SHC 1528C - X	SMW 305X - 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:	☐
			Post-Repair Photos:	☐
			Others:	☐
PRELIMINARY ADVICE	Date/Time:	Sent By:		
FINALIZATION	Date/Time:	Confirm with:	Confirm by:	
Repair Cost: L/S	S\$ \$11,700.00 (7 days) Reduction:	\$9,448.89 % 45	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 31/05/2022	Confirm with MR YEE	Email ☒	Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :		
Repair Cost:	S\$ 12,519.00 W/GST			
Loss of Rental (LOR):	S\$ 877.80 (7 days) x \$125.40	OI MAKING A RIGHT TURN ON A DRIVE STRAIGHT LANE (1ST LANE).		
Loss of Use (LOU):	S\$ (\$ x days)			
Loss of Income (LOI):	S\$ 350.00 (\$ 50 x 7 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\$ 80.00 (e.g. Low /Independent)	2) Report Format: TP		
Legal Cost	S\$	3) Survey fee: \$400.00		
Total:	S\$ 13,834.25	Global Sum S\$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒	Call ☐
Payee 1:	S\$ 13,834.25	Name 1:	BIFROST AUTO PTE LTD	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		