

ASSIGNMENTSurveyor: **NAZ**DOI: **26/04/2021**Date / Time : **26/04/2021**Registered in Merimen: **26/04/2021****Pre-assign / CCU / FTE**Insured Vehicle No. : **SKC 754L**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :\$ _____ D.O.A : **22.04.2021 @23:58**

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

SHD 1485LINSRS:
WSP: **PREMIER**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SHD 1485L - CC3/CT117023050/K1ea3q2 ; 02/12/2017	Non-Reporting ltr (1st):	
	CC3/EQ117024212/R1ea3s2 ; 14/12/2017	Non-Reporting ltr (2nd):	
	SKC 754L - CC4/AIG21003400/Aps3 ; 13.03.2021	Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	
		After call ltr to OI:	
	*OI SETTLED TP CLAIM & LKK FEE	Documentation Check List:	Handler Typist
		Notification ltr (if non-pickup)	☐ ☐
	*PLS REFER VIEWS MEMO FOR DETAILS	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: P/P	S\$ 790.00 (2 days) Reduction: 39 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 02/05/2023 Confirm with Wennis	Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :	
Repair Cost: 7%GST	S\$ 845.30		
Loss of Rental (LOR):	S\$ 124.82 (2 days) X \$62.41		
Loss of Use (LOU):	S\$ (\$ x days)		
Loss of Income (LOI):	S\$ 100.00 (\$ 50 x 2 days)		
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☒	[Tick only one]		
GIA/LTA Search	S\$ 2.00		
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\$ 1,072.12 Global Sum S\$: 1,070.00		
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☒ Call ☐	
Payee 1:	S\$ 1,070.00 Name 1: Premier Automotive Services Pte Ltd		
Payee 2: (Strike if N.A.)	S\$ Name 2:		
Payee 3: (Strike if N.A.)	S\$ Name 3:		