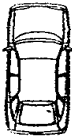


ASSIGNMENTSurveyor: **RASUL**DOI: **30/04/2021**Date / Time : **30/04/2021**Registered in Merimen: **—****Pre-assign / CCU / FTE**Insured Vehicle No. : **YM 8741C**

Claim No. : _____

Name of Insured : **HOME OF SEAFOOD (S) PTE LTD**

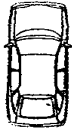
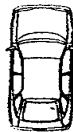
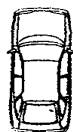
Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **27/04/2021**

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** / NODriver Tel No. : _____ (V/L: **YES** / NO)Insured Liability : _____ % **Final ? Yes / No****SLW 2033D** →INSRS:
WSP: **MOVA**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SLW 2033D : X ; YM 8741C : 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
			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\$ \$3,000.00 (5 days) Reduction: \$920.00 % 23		Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 20/09/2021	Confirm with SUANN	Email ☒	Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 26a	If NO or B 28, Ass. Lia :		
Repair Cost:	S\$ 3,210.00 W/GST			
Loss of Rental (LOR):	S\$ 898.80 (7 days) x \$128.40			
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\$ 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: \$400.00		
Total:	S\$ 4,110.80	Global Sum S\$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒	Call ☐
Payee 1:	S\$ 4,110.80	Name 1:	MOVA AUTOMOTIVE PTE LTD	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		