

ASSIGNMENT

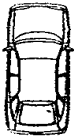
Surveyor: XGQ

DOI: 17/05/2021

Date / Time : 14/05/2021

Registered in Merimen: _____

Pre-assign / CCU / FTE



Insured Vehicle No. : SLM 8540U

Claim No. : _____

Name of Insured : BESTLINK VEHICLE PTE LTD

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A: 14/05/2021

Place of Accident : _____

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

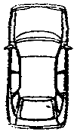
If **NO**, Driver Name / Age :

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

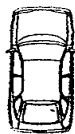
Driver Tel No. : (V/L: **YES** / NO)

Insured Liability :	%	Final ? Yes / No
1. General Liability		
2. Professional Liability		
3. Directors and Officers Liability		
4. Employment Practices Liability		
5. Cyber Liability		
6. Umbrella Liability		
7. Commercial Auto Liability		
8. Watercraft Liability		
9. Aircraft Liability		
10. Marine Liability		
11. Construction Liability		
12. Boiler and Machinery Liability		
13. Pollution Liability		
14. Product Liability		
15. Contractual Liability		
16. Other		

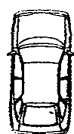
SHD 1234U



INSRS:
WSP: **PREMIER**
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time				
	SHD 1234U : CS3/III12005176/Gqd1 ; DOA : 11/03/2012 SLM 8540U : 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 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: XGQ	
Repair Cost: L/S S\$ 1,250.00 (3 days) Reduction: 56 %			Email ☐ Call ☐	
FINAL SETTLEMENT Date/Time: 02.07.21 Confirm with SHAWATI			Email ☐ Cal ☐	
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 24			If NO or B 28, Ass. Lia :	
Repair Cost: w/GST S\$ 1,337.50			OI REVERSED OUT OF PARKING LOT HIT TP	
Loss of Rental (LOR): S\$ 135.52 (2 days) X \$67.76				
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 + LC ☒ [Tick only one]				
GIA/LTA Search S\$ 7.45				
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	
Total: S\$ 1,580.47 Global Sum S\$: 1,580.00				
FINAL PAYMENT Date/Time: 02.07.21 Confirm with: SHAWATI			Email ☐ Cal ☐	
Payee 1: S\$ 1,580.00			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:	