

ASSIGNMENTSurveyor: TaufikhDOI: 16/06/2021Date / Time : 15/06/2021Registered in Merimen: 15/06/2021**Pre-assign / CCU / FTE**Insured Vehicle No. : GBG 2564R

Claim No. : _____

Name of Insured : DESIGN4U PTE LTD

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 10/06/2021

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**SJS 464BINSRS:
WSP: **EM-1**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SJS 464B : CS3/MSG16005059/R1qh3d1 ; DOA : 14/03/2016	STAGE DATE / PIC
	GBG 2564R : NA/III21006614/r3 ; DOA : 10/06/2021	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: L/S	S\$ \$13,600.00 (14 days) Reduction: \$3,812.48 % 22	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 08/02/2022 Confirm with KAREN	Email ☒ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0%
Repair Cost:	S\$ 14,445.00 W/GST (III'S INSTRUCTION)	
Loss of Rental (LOR):	S\$ _____ (_____ days)	C.C (OI LAST 2ND)
Loss of Use (LOU):	S\$ 800.00 (\$ 50 x 16 days)	
Loss of Income (LOI):	S\$ _____ (\$ _____ x _____ days)	
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LO ☐ [Tick only one]		
GIA/LTA Search	S\$ 36.45	
Medical:	S\$ _____	1) Claim status: Normal /Reject/Private Settle
Disbursement:	S\$ 50.00 (e.g. Tow Independent)	2) Report Format: TP
Legal Cost	S\$ _____	3) Survey fee: \$600.00
Total:	S\$ 15,331.45 Global Sum S\$: 15,000.00	
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☒ Call ☐
Payee 1:	S\$ 15,000.00 Name 1: EM-1 AUTO PTE LTD	
Payee 2: (Strike if N.A.)	S\$ _____ Name 2: _____	
Payee 3: (Strike if N.A.)	S\$ _____ Name 3: _____	