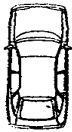


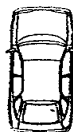
ASSIGNMENTSurveyor: KennethDOI: 30/07/2021Date / Time : 12/07/2021Registered in Merimen: 12/07/2021**Pre-assign / CCU / FTE**

Insured Vehicle No. : SKL 8820D
 Name of Insured : HOLGER HELMUTH LINDEN
 Insured Tel No. : _____ HP: _____
Excess Sec II :S\$ _____ D.O.A : 09/07/2021

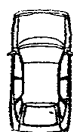
Claim No. : _____
 Policy No. : _____
 Make / Model : _____
 Place of Accident : _____

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****SKD 5386C**

INSRS:
WSP: WEI LEE
Tel : _____
Liability : _____
RMKS: _____



INSRS:
WSP: _____
Tel : _____
Liability : _____
RMKS: _____



INSRS:
WSP: _____
Tel : _____
Liability : _____
RMKS: _____



INSRS:
WSP: _____
Tel : _____
Liability : _____
RMKS: _____

Date/ Time	SKD 5386C : X ; SKL 8820D : 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/SUM	S\$ 950.00	(3 days) Reduction: 65	%	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 27/02/2023	Confirm with KAREN	Email ☒	Call ☐
Final Liability:	% 50	(Agreed / Assessed) BOLA S/N No. :	NIL	If NO or B 28, Ass. Lia :
Repair Cost: 1,026.00	S\$ 513.00	8% GST		
Loss of Rental (LOR):	S\$	(days)		
Loss of Use (LOU): 180.00	S\$ 90.00	(\$ 60 x 3 days)		
Loss of Income (LOI):	S\$	(\$ x days)		
LOR only ☐ LOU only ☒	LOR + LOU ☐	[Tick only one]		
GIA/LTA Search	S\$ 7.45			
Medical:	S\$			
Disbursement:	S\$	(e.g. Tow/ Independent)	1) Claim status: Normal/ Reject/Private Settle	
Legal Cost	S\$	2) Report Format: TP		
Total:	S\$ 610.45	Global Sum S\$: 600.00	3) Survey fee: \$320.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒	Call ☐
Payee 1:	S\$ 600.00	Name 1:	Wei Lee Motor Works	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		