

ASSIGNMENTSurveyor: **Marcus**DOI: **13/08/2021**Date / Time : **12/08/2021**Registered in Merimen: **—****Pre-assign / CCU / FTE**Insured Vehicle No. : **SML 6366M**Claim No. : **—**Name of Insured : **SEOW TSE MENG**Policy No. : **—**Insured Tel No. : **—** HP: **—**Make / Model : **—****Excess Sec II :S\$** **—** D.O.A : **07/07/2021**Place of Accident : **QUEENSWAY**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****FBS 2290S**INSRS:
WSP: F.T. FASTTRACK
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	FBS 2290S : X ; SML 6366M : X		STAGE	DATE / PIC
			Non-Reporting ltr (1st):	
			Non-Reporting ltr (2nd):	
			Non-Reporting ltr (Final):	
		TPV: YAMAHA AEROX 155 - 155cc	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\$ 3,000.00 (4 days)	Reduction: \$3,172.70 % 51	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 09/12/2021	Confirm with FREDDIE	Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 15	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 3,000.00			
Loss of Rental (LOR):	S\$ (days)			
Loss of Use (LOU):	S\$ 80.00 (\$ 20 x 4 days)			
Loss of Income (LOI):	S\$ (\$ x days)			
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LO ☐ [Tick only one]				
GIA/LTA Search	S\$			
Medical:	S\$			
Disbursement:	S\$ (e.g. Tow/ Independent)			1) Claim status: Normal /Reject/Private Settle
Legal Cost	S\$			2) Report Format: TP
				3) Survey fee: \$400.00
Total:	S\$ 3,080.00	Global Sum S\$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒ Call ☐	
Payee 1:	S\$ 3,080.00	Name 1: FT FASTTRACK		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		