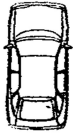


ASSIGNMENTSurveyor: MarcusDOI: 30/08/2021Date / Time : 24/08/2021Registered in Merimen: —**Pre-assign / CCU / FTE**Insured Vehicle No. : GBD 2902P

Claim No. : _____

Name of Insured : B-TEAM CONSTRUCTION SUPPLIES PTE LTD

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :\$S\$ _____ D.O.A : 23/08/2021

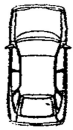
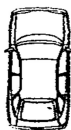
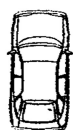
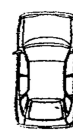
Place of Accident : _____

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**SLF 7674K →INSRS:
WSP: KAH MOTOR
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	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:	☐ ☐
	Post-Repair Photos:	☐ ☐
	Others:	☐ ☐

PRELIMINARY ADVICE	Date/Time:	Sent By:
FINALIZATION	Date/Time:	Confirm with:
Repair Cost: P/P S\$ 9,064.75	(6 days' Reduction: 18 %	Confirm by: CKS
Email ☐ Call ☐		
FINAL SETTLEMENT	Date/Time: 15.11.21	Confirm with: CSLIM
Final Liability: % 100	(Agreed / Assessed) BOLA S/N No. : 27	Email ☐ Call ☐
Repair Cost: w/GST S\$ 9,699.27	OID REAR ENDED TP	
Loss of Rental (LOR) w/GST S\$ 535.00	(5 days) X \$100	
Loss of Use (LOU): S\$ - (\$ x days)		
Loss of Income (LOI): S\$ - (\$ x days)		
LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LC ☐ [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
Total: S\$ 10,236.27	Global Sum S\$:	
FINAL PAYMENT	Date/Time: 15.11.21	Confirm with: CSLIM
Payee 1: S\$ 10,236.27	Name 1: KAH MOTOR CO SDN BERHAD	Email ☐ Call ☐
Payee 2: (Strike if N.A.) S\$	Name 2:	
Payee 3: (Strike if N.A.) S\$	Name 3:	