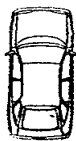


ASSIGNMENTSurveyor: LIMDOI: 02/09/2021Date / Time : 01/09/2021Registered in Merimen: 01/09/2021**Pre-assign / CCU / FTE**Insured Vehicle No. : SME 1383HClaim No. : 6599292338SGName of Insured : TAN PENG CHIANGPolicy No. : 7210004017

Insured Tel No. : _____ HP: _____

Make / Model : Lexus Rx200tExcess Sec II :\$ _____ D.O.A : 29/08/2021 11:10Place of Accident : Bukit Timah Rd, Singapore

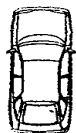
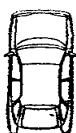
Is driver the owner? (YES / NO) Nature of Accident : _____

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****SBU 1001G**INSRS:
WSP: Team AutoPro
Tel : Pte Ltd.
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			STAGE	DATE / PIC
	SBU 1001G	NBA/AIG21009121/Y ; 29.08.2021	Non-Reporting ltr (1st):	
	SME 1383H		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: LTG	
Repair Cost:	L/S S\$ 4,200.00	(6 days) Reduction: 66 %	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 23.12.21	Confirm with ADEL	Email ☐	Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost:	w/GST S\$ 4,494.00	OI REAR ENDED TP		
Loss of Rental (LOR):	S\$ -	(_____ days)		
Loss of Use (LOU):	S\$ 540.00	(\$ 60 x 9 days)		
Loss of Income (LOI):	S\$ -	(\$ _____ x _____ days)		
LOR only ☐	LOU only ☒	LOR + LOU ☐	LOR + LOI ☐ [Tick only one]	
GIA/LTA Search	S\$ 7.45			
Medical:	S\$ -		1) Claim status: Normal/ Reject/Private Settlement	
Disbursement:	S\$ -	(e.g. Tow/ Independent)	2) Report Format: TP	
Legal Cost	S\$ -		3) Survey fee: \$320	
Total:	S\$ 5,041.45	Global Sum S\$:		
FINAL PAYMENT	Date/Time: 23.12.21	Confirm with: ADEL	Email ☐	Call ☐
Payee 1:	S\$ 5,041.45	Name 1: TEAM AUTOPRO PTE LTD		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		