

Surveyor: ADRIAN DOI: ASSIGNMENT 10/09/2021 Date / Time : 07/09/2021
Registered in Merimen: _____

Pre-assign / CCU / FTE

Insured Vehicle No. : 5025 S
Name of Insured : _____
Insured Tel No. : _____ HP: _____
Excess Sec II : \$ _____ D.O.A : 6/9/2021

Claim No. : 20/21/21/VC40/024928
Policy No. : Z/20/VC40/109099-001
Make / Model : _____
Place of Accident : _____

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

If NO, Driver Name / Age :

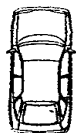
Driver Tel No. :

(V/L: YES / NO)

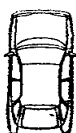
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % **Final ? Yes / No**

YN 2772Y



INSRS:
WSP: **RYDER AUTO**
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
	YN 2772Y -X		
	5025 S - CC4/LPC21009428/Aba3 ; 06.09.2021	Non-Reporting ltr (1st):	
	CC4/LPC21009430/Aea3 ; 06.09.2021	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: _____ Confirm by: LWP		
Repair Cost: L/S S\$ 3,700.00 (4 days) Reduction: 75 %	Email ☐ Call ☐		
FINAL SETTLEMENT Date/Time: 12.07.22 Confirm with ZEPH	Email ☐ Call ☐		
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :		
Repair Cost: w/GST S\$ 3,959.00	OID HIT TP STATIONARY VEHICLE		
Loss of Rental (LOR): S\$ - (_____ days)			
Loss of Use (LOU): S\$ 840.00 (\$ 140 x 6 days)			
Loss of Income (LOI): S\$ - (\$ _____ x _____ days)			
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]			
GIA/LTA Search S\$ 36.45			
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\$ 4,835.45 Global Sum S\$: 4,830.00			
FINAL PAYMENT Date/Time: 12.07.22 Confirm with: ZEPH	Email ☐ Call ☐		
Payee 1: S\$ 4,830.00 Name 1: RYDER AUTO PTE LTD			
Payee 2: (Strike if N.A.) S\$ _____ Name 2: _____			
Payee 3: (Strike if N.A.) S\$ _____ Name 3: _____			