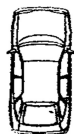


ASSIGNMENTSurveyor: **STEVE**DOI: **23/09/2021**Date / Time : **23/09/2021**Registered in Merimen: **—****Pre-assign / CCU / FTE**Insured Vehicle No. : **GBF 1861U**

Claim No. : _____

Name of Insured : **DES-WOOD PTE LTD**

Policy No. : _____

Insured Tel No. : _____ HP: _____

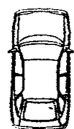
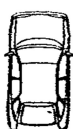
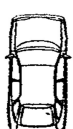
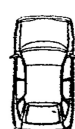
Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **22/09/2021**

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** / NODriver Tel No. : _____ (V/L **YES** / NO)Insured Liability : _____ % **Final ? Yes / No****SHC 4734D**INSRS:
WSP: **SMRT**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	STAGE	DATE / PIC
SHC 4734D : CS/TIT09013185/Zwz1 ; DOA : 11/06/2009	Non-Reporting ltr (1st):	
GBF 1861U : X	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: CTY		
Repair Cost: L/S S\$ 1,800.00 (3 days' Reduction: 83 %	Email ☐ Call ☐	
FINAL SETTLEMENT Date/Time: 03.11.21 Confirm with LEE GEK	Email ☐ Call ☐	
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost: S\$ 1,800.00	OID REAR ENDED TP	
Loss of Rental (LOR): S\$ 681.59 (6.5 days) X \$104.86		
Loss of Use (LOU): S\$ - (\$ x days)		
Loss of Income (LOI): S\$ 325.00 (\$ 50 x 6.5 days)		
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☒ [Tick only one]		
GIA/LTA Search S\$ 7.00		
Medical: S\$ -	1) Claim status: Normal/ Reject/Dispute/Settle	
Disbursement: S\$ - (e.g. Tow/ Independent)	2) Report Format: TP	
Legal Cost S\$ -	3) Survey fee: \$400	
Total: S\$ 2,813.59 Global Sum S\$: 2,810.00		
FINAL PAYMENT Date/Time: 03.11.21 Confirm with: LEE GEK	Email ☐ Call ☐	
Payee 1: S\$ 2,810.00 Name 1: STRIDES TAXI PTE LTD		
Payee 2: (Strike if N.A.) S\$ _____ Name 2: _____		
Payee 3: (Strike if N.A.) S\$ _____ Name 3: _____		