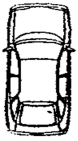


ASSIGNMENTSurveyor: **RASUL**DOI: **22/09/2021**Date / Time : **22/09/2021**Registered in Merimen: **27/09/2021****Pre-assign / CCU / FTE**Insured Vehicle No. : **GBD 5460C**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : S\$ _____ D.O.A : **17/09/2021**

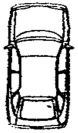
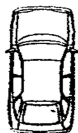
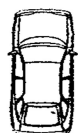
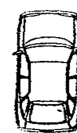
Place of Accident : _____

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

If NO, Driver Name / Age : _____

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

Driver Tel No. : _____ (V/L: YES / NO)

Insured Liability : % **Final ? Yes / No****SHB 5318X**INSRS:
WSP: **SMRT , WL**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SHB 5318X - CC3/CTI18015383/Nda3n2; 19/08/2018	STAGE
	CS/TIT07002750/IKw XX; 13/11/2007	DATE / PIC
	GBD 5460C - CS3/AIG15002102/Ga3w2 ; 04.02.2015	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: L/S S\$ 800.00 (3 days) Reduction: 88 %	Confirm by: MRB
		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 25.11.21 Confirm with LEE GEK	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost:	S\$ 800.00	OID CHANGED LANE HIT TP
Loss of Rental (LOR):	S\$ 447.28 (4 days) X \$111.82	
Loss of Use (LOU):	S\$ - (\$ x days)	
Loss of Income (LOI):	S\$ 200.00 (\$ 50 x 4 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/Private Settle
Disbursement:	S\$ - (e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S\$ -	3) Survey fee: \$320
Total:	S\$ 1,454.28	Global Sum S\$: 1,450.00
FINAL PAYMENT	Date/Time: 25.11.21 Confirm with: LEE GEK	Email ☐ Call ☐
Payee 1:	S\$ 1,450.00 Name 1: STRIDES TAXI PTE LTD	
Payee 2: (Strike if N.A.)	S\$ Name 2:	
Payee 3: (Strike if N.A.)	S\$ Name 3:	