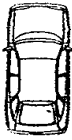


ASSIGNMENTSurveyor: KennethDOI: 12/10/2021Date / Time : 11/10/2021Registered in Merimen: 11/10/2021**Pre-assign / CCU / FTE**Insured Vehicle No. : SNA 5222Y

Claim No. : _____

Name of Insured : MENDONCA TOLENTINO MANOJ

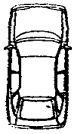
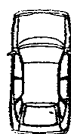
Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 09/10/2021

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****SLJ 3747P**INSRS:
WSP: **CITY AUTO**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SLJ 3747P : X ; SNA 5222Y : X		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
			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:	
Repair Cost: L/SUM	S\$ 4,950.00 (6 days) Reduction: 38	%	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 14/03/2023	Confirm with: Vronica	Email ☒	Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL		If NO or B 28, Ass. Lia :	
Repair Cost: 7% GST	S\$ 5,296.50			
Loss of Rental (LOR):	S\$ (days)			
Loss of Use (LOU):	S\$ 420.00 (\$ 60 x 7 days)			
Loss of Income (LOI):	S\$ (\$ x days)			
LOR only ☐ LOU only ☒	LOR + LOU ☐ LOR + LO ☐ [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: \$320.00	
Total:	S\$ 5,718.50	Global Sum S\$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒	Call ☐
Payee 1:	S\$ 5,718.50	Name 1:	CITY AUTO PTE LTD	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		