

ASSIGNMENT

Surveyor: KennethDOI: 12/11/2021Date / Time : 15/11/2021Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : GBK 5912DClaim No. : SNM21D206507Name of Insured : SLK (S) PTE. LTD.Policy No. : DMCVSNW00104192101

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 11/11/2021

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

SMD 837C

INSRS:
WSP: OPTIMA WERKZ
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SMD 837C : X	STAGE
	GBK 5912D : NBA/CTI21011567/Y ; DOA : 11/11/2021	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 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:
Repair Cost: P/P	S\$ 23,210.61 (16 days) Reduction: 41 %	Confirm by:
		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 15/07/2022	Confirm with: Kaitlyn
		Email ☒ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0
Repair Cost: w/GST	S\$ 24,835.35	
Loss of Rental (LOR):	S\$ (days)	
Loss of Use (LOU):	S\$ 1,140.00 (\$ 60 x 19 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\$	
Disbursement:	S\$ 90.00 (e.g. Tow/Independent)	1) Claim status: Normal/ Reject/Private Settle
Legal Cost	S\$	2) Report Format: TP
		3) Survey fee: \$400.00
Total:	S\$ 26,067.35	Global Sum S\$: 26,000.00
FINAL PAYMENT	Date/Time:	Confirm with:
		Email ☒ Call ☐
Payee 1:	S\$ 26,000.00	Name 1: Optima Werkz Pte Ltd
Payee 2: (Strike if N.A.)	S\$	Name 2:
Payee 3: (Strike if N.A.)	S\$	Name 3: