

ASSIGNMENTSurveyor: RASULDOI: 14/12/2021Date / Time : 16/11/2021Registered in Merimen: 16/11/2021**Pre-assign / CCU / FTE**Insured Vehicle No. : PC 6603RClaim No. : MFL2021D0004961

Name of Insured : _____

Policy No. : D20MFL0003256_01

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 09/11/2021 17:20Place of Accident : SLIP RD TO JURONG TOWN HALL ROAD

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**SMD 5299YINSRS:
WSP: SNG AH TEE
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SMD 5299Y - X	PC 6603R - 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 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: <u>MRB</u>	
Repair Cost:	<u>L/S</u> S\$ <u>1,050.00</u> (<u>3</u> days) Reduction: <u>63</u> %	Email ☐ Call ☐		
FINAL SETTLEMENT	Date/Time: <u>19.05.22</u> Confirm with <u>JANICE</u>	Email ☐ Call ☐		
Final Liability:	% <u>100</u> (Agreed / Assessed) BOLA S/N No. : <u>27</u>	If NO or B 28, Ass. Lia :		
Repair Cost:	<u>w/GST</u> S\$ <u>1,123.50</u>	<u>OID REAR ENDED TP</u>		
Loss of Rental (LOR):	S\$ <u>-</u> (<u> </u> days)			
Loss of Use (LOU):	S\$ <u>180.00</u> (\$ <u>60</u> x <u>3</u> days)			
Loss of Income (LOI):	S\$ <u> </u> (\$ <u> </u> x <u> </u> days)			
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]				
GIA/LTA Search	S\$ <u>7.45</u>			
Medical:	S\$ <u>-</u>	1) Claim status: Normal/ Reject/Private Settlement		
Disbursement:	S\$ <u>-</u> (e.g. Tow/ Independent)	2) Report Format: <u>TP</u>		
Legal Cost	S\$ <u>-</u>	3) Survey fee: <u>\$350</u>		
Total:	S\$ <u>1,310.95</u>	Global Sum S\$: <u>1,310.00</u>		
FINAL PAYMENT	Date/Time: <u>19.05.22</u> Confirm with: <u>JANICE</u>	Email ☐ Call ☐		
Payee 1:	S\$ <u>1,310.00</u>	Name 1: <u>SNG AH TEE MOTOR & PANEL SERVICE PTE LTD</u>		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		