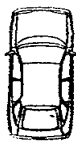


ASSIGNMENT

Surveyor:

RASULDOI: 19/11/2021Date / Time : 19/11/2021Registered in Merimen: 22/11/2021**Pre-assign / CCU / FTE**Insured Vehicle No. : SMG 9509A

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 03.11.2021 08:52

Place of Accident : _____

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

If NO, Driver Name / Age :

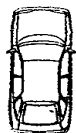
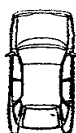
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. :

(V/L: YES / NO)

Insured Liability : %

Final ? Yes / No

SG 6111LINSRS:
WSP: STRIDES
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SG 6111L - X	SMG 9509A - 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>P/P</u> S\$ <u>619.00</u> (<u>1</u> days) Reduction: <u>71</u> %	Email	☐	Call ☐
FINAL SETTLEMENT	Date/Time: <u>05.04.22</u> Confirm with <u>KAREN</u>	Email	☐	Call ☐
Final Liability:	% <u>100</u> (Agreed / Assessed) BOLA S/N No. : <u>15</u>	If NO or B 28, Ass. Lia :		
Repair Cost:	S\$ <u>619.00</u>	<u>OI CHANGED LANE HIT TP</u>		
Loss of Rental (LOR):	S\$ <u>-</u> (<u> </u> days)			
Loss of Use (LOU):	S\$ <u>650.00</u> (\$ <u>325</u> x <u>2</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>7.00</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>\$320</u>		
Total:	S\$ <u>1,276.00</u>	Global Sum S\$:		
FINAL PAYMENT	Date/Time: <u>05.04.22</u> Confirm with: <u>KAREN</u>	Email	☐	Call ☐
Payee 1:	S\$ <u>1,276.00</u>	Name 1:	<u>SMRT BUSES LTD</u>	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		