

ASSIGNMENT

Surveyor:

Adrian

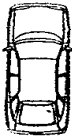
DOI:

23/11/2021

Date / Time :

23/11/2021

Registered in Merimen:

23/11/2021**Pre-assign / CCU / FTE**Insured Vehicle No. : **SMC 616D**Claim No. : **5543520971SG**Name of Insured : **LIM YONG SENG**Policy No. : **7210028086**

Insured Tel No. : _____ HP: _____

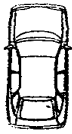
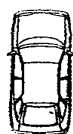
Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **19/11/2021**

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****SFE 8000A**INSRS:
WSP: **JL PERFECT**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SFE 8000A : CC4/GRB21003402/Ags3 ; DOA : 15/03/2021	STAGE
	SMC 616D : X	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:
		Confirm by: LWP
Repair Cost:	L/S S\$ 35,400.00 (18 days) Reduction: 68 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 11.04.22 Confirm with MICHELLE	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 100%
Repair Cost:	S\$ 35,400.00 3VEH CC OID LAST	
Loss of Rental (LOR):	S\$ - (- days)	
Loss of Use (LOU):	S\$ 1,800.00 (\$ 100 x 18 days)	
Loss of Income (LOI):	S\$ - (\$ - x - days)	
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LO ☐ [Tick only one]		
GIA/LTA Search	S\$ 36.45	
Medical:	S\$ -	
Disbursement:	S\$ 120.00 (e.g. Tow/ Independent)	1) Claim status: Normal/ Reject/Private Settle
Legal Cost	S\$ -	2) Report Format: TP
		3) Survey fee: \$320
Total:	S\$ 37,356.45 Global Sum S\$: 36,890.00	
FINAL PAYMENT	Date/Time: 11.04.22 Confirm with: MICHELLE	Email ☐ Call ☐
Payee 1:	S\$ 36,890.00 Name 1: JL PERFECT AUTOWORK PTE LTD	
Payee 2: (Strike if N.A.)	S\$ _____ Name 2: _____	
Payee 3: (Strike if N.A.)	S\$ _____ Name 3: _____	