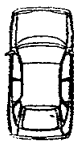


ASSIGNMENTSurveyor: LIM

DOI: _____

Date / Time : 07/12/2021Registered in Merimen: 07/12/2021**Pre-assign / CCU / FTE**Insured Vehicle No. : SMS 3993K

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 05/12/2021 21:15

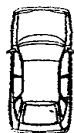
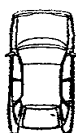
Place of Accident : _____

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**SLU 8888AINSRS:
WSP: **TEAM**
Tel : **AUTOPRO**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SLU 8888A - X	SMS 3993K - 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: _____	
Repair Cost: LS	S\$ \$42,000.00 (7 days) Reduction: \$38,614.16% 48	Email ☐ Call ☐		
FINAL SETTLEMENT	Date/Time: 20/03/2023 Confirm with ADEL	Email ☒ Call ☐		
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :		
Repair Cost: 7% GST	S\$ 44,940.00 W/GST			
Loss of Rental (LOR):	S\$ 1,712.00 (10 days) x \$160.00 (W/GST)	TP PIR AGAINST OI		
Loss of Use (LOU):	S\$ (\$ x days)			
Loss of Income (LOI):	S\$ (\$ x days)			
LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]				
GIA/LTA Search	S\$ 7.45			
Medical:	S\$	1) Claim status: Normal/Reject/Private Settle		
Disbursement:	S\$ 120.00 (e.g. Tow/ Independent)	2) Report Format: TP		
Legal Cost	S\$	3) Survey fee: \$320.00		
Total:	S\$ 46,779.45	Global Sum S\$: 46,770.00		
FINAL PAYMENT	Date/Time: _____	Confirm with: _____	Email ☒ Call ☐	
Payee 1:	S\$ 46,770.00	Name 1:	Team Autopro Pte Ltd	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		