

Surveyor:

Thevan

DOI:

ASSIGNMENT
10/12/2021

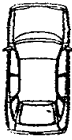
Date / Time :

16/12/2021

Registered in Merimen:

16/12/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : **SMG 4164T**
 Name of Insured : **DAIMLER FLEET MANAGEMENT SINGAPORE PTE. LTD**

Claim No. : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **09/12/2021**

Place of Accident : _____

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

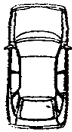
If NO, Driver Name / Age :

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

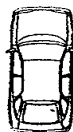
Driver Tel No. :

(V/L: **YES** / NO)Insured Liability : % **Final ? Yes / No**

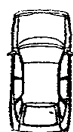
SNB 8217M



INSRS:
WSP: **LEE SHENG**
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SNB 8217M : X ; SMG 4164T : 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
			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: 1/SUM	S\$ 2,850.00 (4 days) Reduction: 59 %		Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 11/01/2023 Confirm with Ms Lee		Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :	
Repair Cost: W/GST	S\$ 3,049.50			
Loss of Rental (LOR):	S\$ (days)			
Loss of Use (LOU):	S\$ 320.00 (\$ 80 x 4 days)			
Loss of Income (LOI):	S\$ (\$ x days)			
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LO ☐ [Tick only one]				
GIA/LTA Search	S\$			
Medical:	S\$		1) Claim status: Normal/ Reject/Private Settle	
Disbursement:	S\$ (e.g. Tow/ Independent)		2) Report Format: TP	
Legal Cost	S\$		3) Survey fee: \$320.00	
Total:	S\$ 3,369.50	Global Sum S\$: 3,360.00		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒ Call ☐	
Payee 1:	S\$ 3,360.00	Name 1:	LEE SHENG AUTO PTE LTD	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		