

ASSIGNMENTSurveyor: Bryan

DOI: _____

Date / Time : 20/12/2021

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : SGV 6715H

Claim No. : _____

Name of Insured : YAP GIM HWA

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 18/12/2021

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** NODriver Tel No. : _____ (V/L: **YES** NO)Insured Liability : _____ % **Final ? Yes / No****SHA 1839R**INSRS:
WSP: **BIFROST**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SHA 1839R : CC3/AIG17010584/H1pb3s2 ; DOA : 27/05/2017 SGV 6715H : 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: L/SUM	S\$ 11,800.00 (8 days) Reduction: 62 %		Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 12/01/2023	Confirm with Janice	Email ☒	Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 9		If NO or B 28, Ass. Lia :	
Repair Cost: w/GST	S\$ 12,626.00			
Loss of Rental (LOR):	S\$ 1,106.70 (10 days) X\$110.67			
Loss of Use (LOU):	S\$ (\$ x days)			
Loss of Income (LOI):	S\$ 500.00 (\$ 50 x 10 days)			
LOR only ☐ LOU only ☐ LOR + LOU ☒	[Tick only one]			
GIA/LTA Search	S\$ 7.45			
Medical:	S\$		1) Claim status: Normal/ Reject / Private Settle	
Disbursement:	S\$ 80.00 (e.g. Tow/ Independent)		2) Report Format: TP	
Legal Cost	S\$		3) Survey fee: \$400.00	
Total:	S\$ 14,320.15	Global Sum S\$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒	Call ☐
Payee 1:	S\$ 14,320.15	Name 1: Bifrost Auto Pte Ltd		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		