

ASSIGNMENT

Surveyor:

Adrian

DOI:

06/01/2022

Date / Time :

07/01/2022

Registered in Merimen:

Pre-assign / CCU / FTEInsured Vehicle No. : **YN 2848M**Claim No. : **SNM22D200124**Name of Insured : **SKYLINK VEHICLE RENTAL PTE LTD**Policy No. : **DMCVSNA00049832100**

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **05/01/2022**

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****SJJ 6656Y**INSRS:
WSP: **MG SOLUTION**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SJJ 6656Y : CS/AIG10011476/T1bg1 ; DOA : 12/02/2010	STAGE DATE / PIC
	YN 2848M : CS/CTI18007572/T1tbs2 ; DOA : 23/04/2018	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: _____
Repair Cost: L/sum	S\$ 3,700.00 (5 days) Reduction: 63 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 23/06/2022 Confirm with Ms Wong	Email ☒ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S\$ 3,959.00	
Loss of Rental (LOR):	S\$ _____ (_____ days)	
Loss of Use (LOU):	S\$ 360.00 (\$ 60 x 6 days)	
Loss of Income (LOI):	S\$ _____ (\$ _____ x _____ days)	
LOR only ☐ LOU only ☒	LOR + LOU ☐ LOR + LO ☐ [Tick only one]	
GIA/LTA Search	S\$ 7.45	
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: \$400.00
Total:	S\$ 4,326.45 Global Sum S\$:	
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☒ Call ☐
Payee 1:	S\$ 4,326.45 Name 1: MG Solution Pte Ltd	
Payee 2: (Strike if N.A.)	S\$ _____ Name 2: _____	
Payee 3: (Strike if N.A.)	S\$ _____ Name 3: _____	