

ASSIGNMENTSurveyor: MARCUSDOI: 10/01/2022Date / Time : 10/01/2022Registered in Merimen: 10/01/2022**Pre-assign / CCU / FTE**Insured Vehicle No. : SDJ 8800E

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

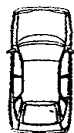
Excess Sec II :\$ _____ D.O.A : 08/01/2022Place of Accident : 8 Sentosa Gateway

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**SKS 9688BINSRS:
WSP: TAN LIM
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	<u>SKS 9688B - CC4/III21011498/ra3 ; 02.11.2021</u>	Non-Reporting ltr (1st):	
	<u>SDJ 8800E - X</u>	Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	
	<u>CLAIMANT - Chew Shu Choon</u>	After call ltr to OI:	
		Documentation Check List:	Handler Typist
		Notification ltr (if non-pickup)	☐ ☐
	<u>TPV: TOYOTA PREVIO - 2362 cc</u>	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: <u>P/P</u> S\$ <u>4977.60</u> (<u>3</u> days) Reduction: <u>1582.60</u> % <u>24</u>		Email ☐ Call ☐	
FINAL SETTLEMENT Date/Time: <u>20/05/2022</u> Confirm with <u>SHARON</u>		Email ☒ Call ☐	
Final Liability: % <u>100</u> (Agreed / Assessed) BOLA S/N No. : <u>23</u>		If NO or B 28, Ass. Lia :	
Repair Cost: S\$ <u>5,326.03</u> <u>W/GST</u>			
Loss of Rental (LOR): S\$ <u>321.00</u> (<u>3</u> days) x \$107.00 <u>W/GST</u>			
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\$			
Medical: S\$		1) Claim status: ☒ Normal/Reject/Private Settle	
Disbursement: S\$ (e.g. Tow/ Independent)		2) Report Format: <u>TP</u>	
Legal Cost S\$		3) Survey fee: <u>\$320.00</u>	
Total: S\$ <u>5,647.03</u> Global Sum S\$:			
FINAL PAYMENT Date/Time:	Confirm with:	Email ☒ Call ☐	
Payee 1: S\$ <u>5,647.03</u>	Name 1: <u>TAN LIM MOTOR PTE LTD</u>		
Payee 2: (Strike if N.A.) S\$	Name 2:		
Payee 3: (Strike if N.A.) S\$	Name 3:		