

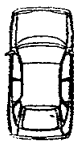
ASSIGNMENT

Surveyor:

ADRIANDOI: 12/01/2022Date / Time : 12/01/2022

Registered in Merimen: _____

Pre-assign / CCU / FTE

Insured Vehicle No. : XE 4295DClaim No. : S2M03QUZName of Insured : LEGEND MOTORS & LEASING PTE LTDPolicy No. : P1847906

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 11.01.2022

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

SMQ 3901LINSRS:
WSP: MG SOLUTION
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SMQ 3901L - X	XE 4295D - 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:	☐
PRELIMINARY ADVICE	Date/Time:	Sent By:	Post-Repair Photos:	☐
			Others:	☐
FINALIZATION	Date/Time:	Confirm with:	Confirm by: <u>LWP</u>	
Repair Cost:	<u>L/S</u> S\$ <u>7,300.00</u>	(<u>6</u> days) Reduction: <u>58</u> %	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: <u>17.08.22</u>	Confirm with <u>MS WONG</u>	Email ☐	Call ☐
Final Liability:	% <u>100</u>	(Agreed / Assessed) BOLA S/N No. : <u>27</u>	If NO or B 28, Ass. Lia :	
Repair Cost:	<u>w/GST</u> S\$ <u>7,811.00</u>	<u>OID REAR ENDED TP</u>		
Loss of Rental (LOR):	S\$ <u>-</u>	(_____ days)		
Loss of Use (LOU):	S\$ <u>480.00</u>	(\$ <u>60</u> x <u>8</u> days)		
Loss of Income (LOI):	S\$ <u>✓</u>	(\$ _____ x _____ days)		
LOR only ☐	LOU only ☒	LOR + LOU ☐	LOR + LOI ☐	[Tick only one]
GIA/LTA Search	S\$ <u>7.45</u>			
Medical:	S\$ <u>-</u>		1) Claim status: Normal/ Reject/Private Settle	
Disbursement:	S\$ <u>-</u>	(e.g. Tow/ Independent)	2) Report Format: <u>TP</u>	
Legal Cost	S\$ <u>-</u>		3) Survey fee: <u>\$350</u>	
Total:	S\$ <u>8,298.45</u>	Global Sum S\$:		
FINAL PAYMENT	Date/Time: <u>17.08.22</u>	Confirm with: <u>MS WONG</u>	Email ☐	Call ☐
Payee 1:	S\$ <u>8,298.45</u>	Name 1: <u>MG SOLUTION PTE LTD</u>		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		