		CC6/AIG22000573/Vps3	LKK:
INS. CASE OWNER:			IDAC:

ASSIGNMENT

Surveyor: **Thevan**   DOI: **17/01/2022**   Date / Time : **17/01/2022**

Registered in Merimen: **17/01/2022**

Pre-assign / CCU / FTE

Insured Vehicle No. :	**GBE 3594H**	Claim No. :	
Name of Insured :	HING SING ENTERPRISE	Policy No. :	
Insured Tel No. :	HP:	Make / Model :	
Excess Sec II :S$	D.O.A : **15/01/2022**	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**

GBB 2096B ⟶ ⟶ ⟶

INSRS:	INSRS:	INSRS:	INSRS:
WSP: **RYDER AUTO**	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time	GBB 2096B : X ; GBE 3594H : 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:

	Handler	Typist
Post-Repair Photos:		
Others:		

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: **L/sum** S$ **5,500.00** (**5** days) Reduction: **41** %   Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: **04/04/2022** Confirm with **Zeph**   Email ✔ Call ☐

Final Liability:	% **100** (Agreed / Assessed) BOLA S/N No. : **27**	If NO or B 28, Ass. Lia :
Repair Cost: **w/GST**	S$ **5,885.00**	
Loss of Rental (LOR):	S$ (days)	
Loss of Use (LOU):	S$ **700.00** ($ **100** x **7** days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only ✔ LOU only ☐ LOR + LOU ☐ LOR + LO ☐ [**Tick only one**]		
GIA/LTA Search	S$ **36.45**	
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: **$320.00**
Total:	S$ **6,621.45** Global Sum S$: **6,600.00**	

FINAL PAYMENT Date/Time: Confirm with: Email ✔ Cal ☐

Payee 1:	S$ **6,600.00**	Name 1:	**Ryder Auto Pte Ltd**
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	