

ASSIGNMENTSurveyor: MarcusDOI: 24/01/2022Date / Time : 24/01/2022Registered in Merimen: 24/01/2022**Pre-assign / CCU / FTE**Insured Vehicle No. : SGU 6201D

Claim No. : _____

Name of Insured : Andrew Lim Hock Eng

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 23/01/2022Place of Accident : Bukit Panjang Ring Road left turn to
Bukit Panjang Road (Corner of
Senja - Cashew CC

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****SMK 3563K**INSRS:
WSP: **TAN LIM**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SMK 3563K : X ; SGU 6201D : X		STAGE	DATE / PIC
25/01/2022	OINR *** SENT OUT FIRST NON-REPORTING LETTER BY EMAIL		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/S	S\$ \$6,200.00	(6 days) Reduction: \$6,339.08 % 51	Email ☐	Call ☐
FINAL SETTLEMENT Date/Time: <u>10/06/2022</u> Confirm with <u>SHARON</u>			Email ☒	Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 6,634.00	W/GST		
Loss of Rental (LOR):	S\$ 642.00	(6 days) x \$107.00 W/GST		
Loss of Use (LOU):	S\$ (\$ x days)			
Loss of Income (LOI):	S\$ (\$ x days)			
LOR only ☒ LOU only ☐	LOR + LOU ☐	LOR + LO ☐ [Tick only one]		
GIA/LTA Search	S\$ 2.00			
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\$ 7,278.00	Global Sum S\$:		
FINAL PAYMENT Date/Time: _____ Confirm with: _____			Email ☒	Call ☐
Payee 1:	S\$ 7,278.00	Name 1: TAN LIM MOTOR PTE LTD		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		