

ASSIGNMENTSurveyor: **ADRIAN**DOI: **09/02/2022**Date / Time : **09/02/2022**Registered in Merimen: **11/02/2022****Pre-assign / CCU / FTE**Insured Vehicle No. : **SMP 5728M**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____

HP: _____

Make / Model : _____

Excess Sec II :S\$D.O.A : **01.02.2022 15:45**Place of Accident : **PUNGGOL WAY**

Is driver the owner?

(YES / NO)

Nature of Accident : _____

If **NO**, Driver Name / Age :

Driver Tel No. : _____

(V/L: YES / NO)

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : _____ %

Final ? Yes / No**SMM 4481X**INSRS:
WSP: **XIN HUA
WORKSHOP
PTE LTD**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SMM 4481X - CS/AGI21002644/Avf3n2 ; 21.02.2021	Non-Reporting ltr (1st):	
	SMP 5728M - CC6/AIG22000575/Vrs3 ; 14.01.2022	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: LWP	
Repair Cost: L/S	S\$ 4,600.00 (4 days) Reduction: 84 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 12.08.22 Confirm with KERRY	Email ☐ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 15	If NO or B 28, Ass. Lia :	
Repair Cost: w/GST	S\$ 4,922.00	OID CHANGED LANE AND HIT TP REAR	
Loss of Rental (LOR):	S\$ 600.00 (6 days) x \$100		
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\$ 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: \$320	
Total:	S\$ 5,529.45 Global Sum S\$: 5,520.00		
FINAL PAYMENT	Date/Time: 12.08.22 Confirm with: KERRY	Email ☐ Call ☐	
Payee 1:	S\$ 5,520.00 Name 1: XIN HUA WORKSHOP PTE LTD		
Payee 2: (Strike if N.A.)	S\$ Name 2:		
Payee 3: (Strike if N.A.)	S\$ Name 3:		