

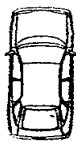
ASSIGNMENT

Surveyor: _____

DOI: _____

Date / Time : **15/02/2022**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **GBC 135E**

Claim No. : _____

Name of Insured : **UNION EXHIBITION**Policy No. : **Z22VC05010011**

Insured Tel No. : _____ HP: _____

Make / Model : _____

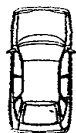
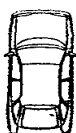
Excess Sec II :S\$ _____ D.O.A : **13/02/2022 18:04**Place of Accident : **BLK. 20 & 21, TOA PAYOH LORONG 7 OPEN-AIR CARPARK**

Is driver the owner? (YES / NO) Nature of Accident : _____

If **NO**, Driver Name / Age : **KOH HOI TENG**

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

Driver Tel No. : _____ (V/L: YES / NO)

Insured Liability : % **Final ? Yes / No****SKP 6889Z**INSRS:
WSP: **AVANTAGE**
Tel : **VAG**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SKP 6889Z - NA/FC16017561/h4 ; 16/09/2016	STAGE	DATE / PIC
	NA/LPC22001461/m4 ; 13/02/2022	Non-Reporting ltr (1st):	
	NS/INC16010906/K1vbd1 ; 10/06/2016	Non-Reporting ltr (2nd):	
	GBC 135E - NA/LPC22001461/m4 ; 13.02.2022	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: MRB
Repair Cost: L/S S\$ 6,400.00	(6 days) Reduction: 27 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 04.07.22	Confirm with TEE WEE SIN	Email ☐ Call ☐
Final Liability: % 100	(Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :	
Repair Cost: w/GST S\$ 6,848.00	OID CUT INTO TP LANE AND HIT TP		
Loss of Rental (LOR): S\$ -	(_____ days)		
Loss of Use (LOU): S\$ 480.00	(\$ 60 x 8 days)		
Loss of Income (LOI): S\$ -	(\$ _____ x _____ days)		
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐	[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: \$400	
Total: S\$ 7,330.00	Global Sum S\$:		
FINAL PAYMENT	Date/Time: 04.07.22	Confirm with: TEE WEE SIN	Email ☐ Call ☐
Payee 1: S\$ 7,330.00	Name 1: CYS AUTOMOBILE SERVICES PTE LTD		
Payee 2: (Strike if N.A.) S\$	Name 2:		
Payee 3: (Strike if N.A.) S\$	Name 3:		