

ASSIGNMENT

Surveyor:

MARCUS

DOI:

25/02/2022

Date / Time :

25/02/2022

Registered in Merimen:

Pre-assign / CCU / FTEInsured Vehicle No. : **GBF 208M**

Claim No. :

SNM22D201330/C02/GBF208M/TANKW

Name of Insured :

Policy No. :

DMCVSNW00039972100

Insured Tel No. :

HP:

Make / Model :

Excess Sec II :S\$

D.O.A :

23.02.2022 08:40

Place of Accident :

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

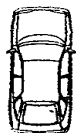
Driver Tel No. :

(V/L: YES / NO)

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

Insured Liability :

%

Final ? Yes / No**SMA 1252Z**

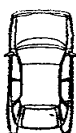
INSRS:

WSP: **SOON SAN**

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time					
	SMA 1252Z - X	GBF 208M - 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:	CKS	
Repair Cost:	L/S S\$ 3,700.00 (5 days) Reduction: 74 %		Email	☐	Call ☐
FINAL SETTLEMENT	Date/Time: 30.05.22 Confirm with VINCENT		Email	☐	Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28		If NO or B 28, Ass. Lia :	0%	
Repair Cost:	S\$ 3,700.00				
Loss of Rental (LOR):	S\$ 800.00 (8 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\$ -				
Medical:	S\$ -		1) Claim status: Normal/Reject/Private Settlement		
Disbursement:	S\$ - (e.g. Tow/ Independent)		2) Report Format:	TP	
Legal Cost	S\$ -		3) Survey fee:	\$400	
Total:	S\$ 4,500.00	Global Sum S\$:			
FINAL PAYMENT	Date/Time: 30.05.22 Confirm with: VINCENT		Email	☐	Call ☐
Payee 1:	S\$ 4,500.00	Name 1:	SOON SAN MOTOR TRADING		
Payee 2: (Strike if N.A.)	S\$	Name 2:			
Payee 3: (Strike if N.A.)	S\$	Name 3:			