

Surveyor:

Steve

DOI:

ASSIGNMENT

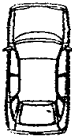
04/03/2022

Date / Time :

04/03/2022

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : XD 9829L

Claim No. : _____

Name of Insured : PROSPAQ GROUP PTE LTD

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 02/03/2022

Place of Accident : _____

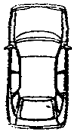
Is driver the owner? (YES / ☒ NO) Nature of Accident : _____

If NO, Driver Name / Age :

OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NODriver Tel No. : _____ (V/L: ☒ YES / NO)

Insured Liability : _____ % Final ? Yes / No

SLE 110Y

INSRS:
WSP: AUTOMOTIVE
Tel : REPAIR CENTRE
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SLE 110Y : X	STAGE DATE / PIC
	XD 9829L : CC3/CTI21010238/R1es3q2 ; DOA : 30/09/2021	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:
FINALIZATION	Date/Time:	Confirm with:
Repair Cost: L/Sum	S\$ 16,960.00 (15 days) Reduction: 59 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 22/03/2023	Confirm with Shu Juan
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28g	Email ☒ Call ☐
Repair Cost: with GST	S\$ 18,147.20	If NO or B 28, Ass. Lia :
Loss of Rental (LOR):	S\$ 2,140.00 (20 days) @\$100 with 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: \$400
Total:	S\$ 20,289.20	Global Sum S\$:
FINAL PAYMENT	Date/Time:	Confirm with:
Payee 1:	S\$ 20,289.20	Name 1: AUTOMOTIVE REPAIR CENTRE PTE LTD
Payee 2: (Strike if N.A.)	S\$	Name 2:
Payee 3: (Strike if N.A.)	S\$	Name 3: