

ASSIGNMENTSurveyor: **KENNETH**DOI: **08/03/2022**Date / Time : **08/03/2022**Registered in Merimen: **09/03/2022****Pre-assign / CCU / FTE**Insured Vehicle No. : **SDN 312D**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : \$ \$ D.O.A : **06/03/2022 07:50**

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 / NO

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

Insured Liability : % **Final ? Yes / No****SMR 6472H**INSRS:
WSP: **YEE AUTO**
Tel : **PTE LTD**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SMR 6472H - NA/LIP21000550/r3 ; 11.01.2021		
	SDN 312D - X	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: KSC	
Repair Cost: L/S	\$ \$ 2,950.00 (4 days) Reduction: 67 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 15.07.22 Confirm with WINNI	Email ☐ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :	
Repair Cost: w/GST	\$ \$ 3,156.50	OI REVERSED AND HIT TP PARKED VEH	
Loss of Rental (LOR):	\$ \$ 480.00 (4 days) x \$120		
Loss of Use (LOU):	\$ \$ - (\$ x days)		
Loss of Income (LOI):	\$ \$ - (\$ x days)		
LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]			
GIA/LTA Search	\$ \$ -		
Medical:	\$ \$ -	1) Claim status: Normal/ Reject/Printed Settlement	
Disbursement:	\$ \$ - (e.g. Tow/ Independent)	2) Report Format: TP	
Legal Cost	\$ \$ -	3) Survey fee: \$320	
Total:	\$ \$ 3,636.50 Global Sum S\$:		
FINAL PAYMENT	Date/Time: 15.07.22 Confirm with: WINNI	Email ☐ Call ☐	
Payee 1:	\$ \$ 3,636.50 Name 1: YEE AUTO PTE LTD		
Payee 2: (Strike if N.A.)	\$ \$ Name 2:		
Payee 3: (Strike if N.A.)	\$ \$ Name 3:		