

ASSIGNMENTSurveyor: ADRIANDOI: 29/03/2022Date / Time : 14.03.2022Registered in Merimen: 14.03.2022**Pre-assign / CCU / FTE**Insured Vehicle No. : SLK 6223JClaim No. : 1198648147SG

Name of Insured : _____

Policy No. : 2100498677-04

Insured Tel No. : _____ HP: _____

Make / Model : _____

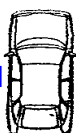
Excess Sec II :\$ _____ D.O.A : 29/12/2021 15:00Place of Accident : Loyang Way, Singapore

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**SJR 8994RINSRS:
WSP: Premium Carz
Tel : Services Pte Ltd
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	<u>SJR 8994R - X</u>	Non-Reporting ltr (1st):	
	<u>SLK 6223J - CC4/AIG18003972/wa3XX ; 27.02.2018</u>	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: <u>LWP</u>		
Repair Cost: <u>P/P</u>	\$S\$ <u>1,310.00</u> (<u>2</u> days) Reduction: <u>56</u> %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: <u>05.09.22</u> Confirm with: <u>AUN TENG</u>	Email ☐ Call ☐	
Final Liability:	% <u>100</u> (Agreed / Assessed) BOLA S/N No. : <u>23</u>	If NO or B 28, Ass. Lia :	
Repair Cost:	\$S\$ <u>1,310.00</u>		
Loss of Rental (LOR):	\$S\$ <u>200.00</u> (<u>2</u> 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\$ <u>7.45</u>		
Medical:	\$S\$ -	1) Claim status: Normal/ Reject Private Settle	
Disbursement:	\$S\$ - (e.g. Tow/ Independent)	2) Report Format: <u>TP</u>	
Legal Cost	\$S\$ -	3) Survey fee: <u>\$320</u>	
Total:	\$S\$ <u>1,517.45</u> Global Sum \$S\$:		
FINAL PAYMENT	Date/Time: <u>05.09.22</u> Confirm with: <u>AUN TENG</u>	Email ☐ Call ☐	
Payee 1:	\$S\$ <u>1,517.45</u> Name 1: <u>PREMIUM CARZ SERVICES PTE LTD</u>		
Payee 2: (Strike if N.A.)	\$S\$ Name 2:		
Payee 3: (Strike if N.A.)	\$S\$ Name 3:		