

ASSIGNMENT

Surveyor:

KENNETH

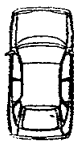
DOI:

06/04/2022

Date / Time :

06/04/2022

Registered in Merimen:

06/04/2022**Pre-assign / CCU / FTE**Insured Vehicle No. : **SML 3812L**Claim No. : **9375492300SG**

Name of Insured :

Policy No. : **1900098789**

Insured Tel No. : _____ HP: _____

Make / Model :

Excess Sec II :S\$D.O.A : **05.04.2022 09:55**Place of Accident : **AYE > JURONG**

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

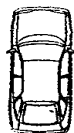
Driver Tel No. :

(V/L: YES / NO)

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

Insured Liability :

%

Final ? Yes / No**SLV 2111S**

INSRS:

WSP: **Optima**
Tel : **Werkz**

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time	SLV 2111S - X	SML 3812L - 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:	☐ ☐
			Post-Repair Photos:	☐ ☐
			Others:	☐ ☐
PRELIMINARY ADVICE	Date/Time:	Sent By:		
FINALIZATION	Date/Time: 27/04/2022	Confirm with:	Confirm by:	
Repair Cost:	S\$ 6,950.00 (10 days) Reduction: 43 %		Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 02/08/2022 Confirm with JOSEPH		Email ☒	Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28		If NO or B 28, Ass. Lia : 100	
Repair Cost:	S\$ 7,436.50			
Loss of Rental (LOR):	S\$ (days)			
Loss of Use (LOU):	S\$ 360.00 (\$ 60.00 x 6 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\$ 360.00 (bicycle rack) (e.g. Tow/ Independent)		2) Report Format:	
Legal Cost	S\$		3) Survey fee:	
Total:	S\$ 8,158.50	Global Sum S\$: 8,150.00		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐	Call ☐
Payee 1:	S\$ 8,150.00	Name 1:		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		