

ASSIGNMENTSurveyor: **KENNETH**

DOI: _____

Date / Time : **08/02/2021**Registered in Merimen: **08/02/2021****Pre-assign / CCU / FTE**Insured Vehicle No. : **SKQ 4448X**

Claim No. : _____

Name of Insured : **WONG WEI LOON**

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$D.O.A : **07/02/2021 15:30**Place of Accident : **INFRONT VERTEX BUILDING**

Is driver the owner? (YES / NO)

Nature of Accident : _____

Ubi Rd 2, Singapore

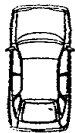
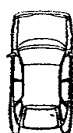
If NO, Driver Name / Age :

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

Driver Tel No. : _____

(V/L: YES / NO)

Insured Liability : _____ %

Final ? Yes / No**SBM 2882R**INSRS:
WSP: **CHENG**
Tel : **HOE**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SBM 2882R - CC4/AIG18001571/Kwa3q2 ; 24/01/2018	Non-Reporting ltr (1st):	
	NA/INC09007671/p1 ; 08/04/2009	Non-Reporting ltr (2nd):	
	SKQ 4448X - CC3/AIG15007975/T1vbq2 ; 01/04/2015	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:	
Repair Cost: L/SUM	S\$ 3,850.00 (7 days) Reduction: 36 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 17/02/2023 Confirm with June	Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 9	If NO or B 28, Ass. Lia :	
Repair Cost: 7% GST	S\$ 4,119.50		
Loss of Rental (LOR):	S\$ _____ (_____ days)		
Loss of Use (LOU):	S\$ 700.00 (\$ 100 x 7 days)		
Loss of Income (LOI):	S\$ _____ (\$ _____ x _____ days)		
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]			
GIA/LTA Search	S\$ 7.49		
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: \$320 - \$290 = \$30.00	
Total:	S\$ 4,826.99	Global Sum S\$:	
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☒ Call ☐	
Payee 1:	S\$ 4,826.99 Name 1: Cheng Hoe Motor Pte Ltd		
Payee 2: (Strike if N.A.)	S\$ _____ Name 2: _____		
Payee 3: (Strike if N.A.)	S\$ _____ Name 3: _____		