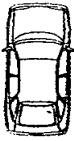


ASSIGNMENT

Surveyor:

MARCUSDOI: **17/05/2022**Date / Time : **17/05/2022**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SHC 5038Z**Claim No. : **S2M0416C**Name of Insured : **TRANS-CAB SERVICES PTE LTD**Policy No. : **P2459880**

Insured Tel No. : _____ HP: _____

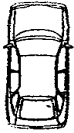
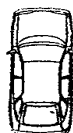
Make / Model : **Toyota Prius****Excess Sec II :S\$** _____ D.O.A : **14/05/2022 22:35**Place of Accident : **Filter lane of Lower Delta Road towards Kampong Giam Road**

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

If NO, Driver Name / Age : **LIM CHENG GHEE**

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

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

Insured Liability : % **Final ? Yes / No****SLE 1340T**INSRS:
WSP: **FASTECH**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SLE 1340T - NA/INC18014238/k4 ; 04.08.2018		
	SHC 5038Z - CC3/III16017010/Kwb3q2; 06/09/2016	Non-Reporting ltr (1st):	
	CC4/AXA16005016/Kub3q2 ; 12/03/2016	Non-Reporting ltr (2nd):	
	CC6/CTI19007227/Kra3q2 ; 22/04/2019	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: CKS	
Repair Cost: L/S S\$ 5,300.00 (7 days) Reduction: 68 %		Email ☐ Call ☐	
FINAL SETTLEMENT Date/Time: 23.06.22 Confirm with JASON		Email ☐ Call ☐	
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :	
Repair Cost: w/GST S\$ 5,671.00		OID REAR ENDED TP	
Loss of Rental (LOR): S\$ - (days)			
Loss of Use (LOU): S\$ 350.00 (\$ 50 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\$ -			
Medical: S\$ -		1) Claim status: Normal/ Reject/Dispute/Settle	
Disbursement: S\$ - (e.g. Tow/ Independent)		2) Report Format: TP	
Legal Cost S\$ -		3) Survey fee: \$350	
Total: S\$ 6,021.00	Global Sum S\$: 5,700.00		
FINAL PAYMENT Date/Time: 23.06.22 Confirm with: JASON		Email ☐ Call ☐	
Payee 1: S\$ 5,700.00	Name 1: FASTECH AUTO PTE LTD		
Payee 2: (Strike if N.A.) S\$	Name 2:		
Payee 3: (Strike if N.A.) S\$	Name 3:		