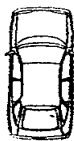


ASSIGNMENTSurveyor: **XING GUO QIANG**DOI: **17/05/2022**Date / Time : **17/05/2022**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SMU 112X**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : \$ _____ D.O.A : **14/05/2022 13:15**Place of Accident : **UPPER SERANGOON ROAD**

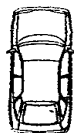
Is driver the owner? (YES / NO) Nature of Accident : _____

TOWARDS HOUGANG

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****SHB 3389D**INSRS:
WSP: **CDGE**
Tel : **LOYANG**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date	Created By	DATE / PIC
SHB 3389D	CC3/AIG16017789/M1wb3q2 15/11/2016 SHB 3389D SLC 1689Z 16/09/2016 17/11/2016 LSP	Non-Reporting ltr (1st):	
	CC3/TMI20005549/Fv3s2 29/06/2020 SHB 3389D SLG 6624G 01/05/2020 29/06/2020 LSP	Non-Reporting ltr (2nd):	
	CS/FC18004823/Avd3n2 20/03/2018 SLK 7555U SHB 3389D 15/02/2018 20/03/2018 NLS	Non-Reporting ltr (3rd):	
	NA/CTI22004602/m4 17/05/2022 GOH TIAN TECK KEITH SMU 112X SHB 3389D 14/05/2022 19/05/2022 SML	Notification ltr (if non-pickup):	
	NS/INC15021261/H1vb2 07/01/2016 SHB 3389D SGH 7008H 08/12/2015 08/01/2016 CL	After call ltr to OI:	
SMU 112X	NA/CTI22004602/m4 17/05/2022 GOH TIAN TECK KEITH SMU 112X SHB 3389D 14/05/2022 19/05/2022 SML		
		Documentation Check List:	Handler
		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: _____ Confirm with: _____ Confirm by: _____		
Repair Cost: Part by Part	S\$ 1,659.44 (3 days) Reduction: 62 %	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 03/02/2023 Confirm with Catherine	Email ☒	Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 15		If NO or B 28, Ass. Lia :
Repair Cost: with GST	S\$ 1,775.60		
Loss of Rental (LOR):	S\$ 625.95 (5 days) @\$125.19		
Loss of Use (LOU):	S\$ (\$ _____ x _____ days)		
Loss of Income (LOI):	S\$ 250.00 (\$ 50 x 5 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\$ (e.g. Tow/ Independent)		2) Report Format: TP
Legal Cost	S\$		3) Survey fee: \$400
Total:	S\$ 2,653.55 Global Sum S\$:		
FINAL PAYMENT	Date/Time: _____ Confirm with: _____ Email ☒ Call ☐		
Payee 1:	S\$ 2,653.55 Name 1: COMFORTDELGRO ENGINEERING PTE LTD		
Payee 2: (Strike if N.A.)	S\$ Name 2:		
Payee 3: (Strike if N.A.)	S\$ Name 3:		