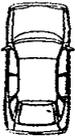


ASSIGNMENT

Surveyor: _____ DOI: _____ Date / Time : 28/07/2022
 Registered in Merimen: _____

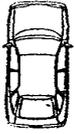
Pre-assign / CCU / FTE



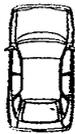
Insured Vehicle No. : SHC 7247Z Claim No. : S2M047PQ
 Name of Insured : CITYCAB PTE LTD Policy No. : P2465703
 Insured Tel No. : _____ HP: _____ Make / Model : Hyundai I40
Excess Sec II :S\$ _____ D.O.A : 27/07/2022 11:55 Place of Accident : BLOCK 354 JURONG EAST ST 31 MSCP
 Is driver the owner? (YES / NO) Nature of Accident : _____

If NO, Driver Name / Age : TEO SENG HUAT OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO
 Driver Tel No. : _____ (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

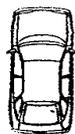
SLR 5661Y



INSRS: _____
 WSP: TWINCAR
 Tel : AUTOMOTIVE
 Liability: PTE LTD
 RMKS: _____



INSRS: _____
 WSP: _____
 Tel : _____
 Liability : _____
 RMKS: _____



INSRS: _____
 WSP: _____
 Tel : _____
 Liability : _____
 RMKS: _____



INSRS: _____
 WSP: _____
 Tel : _____
 Liability : _____
 RMKS: _____

Date/ Time	STAGE	DATE / PIC
SLR 5661Y - X		
SHC 7247Z - Reference Entry Date Customer Name Vehicle No. TP Vehicle No. A	Non Reporting (No)	Close Date Created By
CC3/CT118001823/K1ub3n2 01/06/2018 SHC 7247Z GBG 2544Z 26/01/2018 01/06/2018 LSP	Non Reporting (No)	
CS/FC119002942/R1vd3n2 27/05/2019 SJW 197B SHC 7247Z 04/02/2019 27/05/2019 FWL	Non Reporting (No)	
CS/FC119008003/Eqd3n2 18/06/2019 SLA 12T SHC 7247Z 29/04/2019 18/06/2019 FWL	Notification By (non-pickup)	
NA/INC11025683/s2 14/12/2011 TAN THIAN MENG GR 7447X SHC 7247Z 14/12/2011 19/12/2011 SLK	Call Off	
NS/INC11001099/Gqn 18/10/2011 SHC 7247Z SGT 3396A 07/01/2011 19/10/2011 HYN	After call thru 201	
NS/INC11025802/H1qtn 05/01/2012 SHC 7247Z GR 7447X 14/12/2011 10/03/2012 LTM		
	Documentation Check List:-	Handler Typist
	Notification ltr (if non-pickup)	<input type="checkbox"/> <input type="checkbox"/>
	After call ltr to OI:	<input type="checkbox"/> <input type="checkbox"/>
	Authorisation To Act:	<input type="checkbox"/> <input type="checkbox"/>
	Release Voucher:	<input type="checkbox"/> <input type="checkbox"/>
	Final Repair Bill:	<input type="checkbox"/> <input type="checkbox"/>
	Car Rental Invoice:	<input type="checkbox"/> <input type="checkbox"/>
	Towing Invoice	<input type="checkbox"/> <input type="checkbox"/>
	LTA / GIA :	<input type="checkbox"/> <input type="checkbox"/>
	Medical Bill:	<input type="checkbox"/> <input type="checkbox"/>
	PIR:	<input type="checkbox"/> <input type="checkbox"/>
	Mandate/Reject Instruction:	<input type="checkbox"/> <input type="checkbox"/>
	LOD	<input type="checkbox"/> <input type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/> <input type="checkbox"/>
PRELIMINARY ADVICE Date/Time: _____ Sent By: _____	Post-Repair Photos:	<input type="checkbox"/> <input type="checkbox"/>
	Others:	<input type="checkbox"/> <input type="checkbox"/>
FINALIZATION Date/Time: _____ Confirm with: _____ Confirm by: _____		
Repair Cost: S\$ _____ (_____ days) Reduction: _____ % Email <input type="checkbox"/> Call <input type="checkbox"/>		
FINAL SETTLEMENT Date/Time: _____ Confirm with _____ Email <input type="checkbox"/> Call <input type="checkbox"/>		
Final Liability: % (Agreed / Assessed) BOLA S/N No. : _____ If NO or B 28, Ass. Lia :		
Repair Cost: S\$ _____		
Loss of Rental (LOR): S\$ _____ (_____ days)		
Loss of Use (LOU): S\$ _____ (\$ _____ x _____ days)		
Loss of Income (LOI): S\$ _____ (\$ _____ x _____ days)		
LOR only <input type="checkbox"/> LOU only <input type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/> [Tick only one]		
GIA/LTA Search S\$ _____		
Medical: S\$ _____		
Disbursement: S\$ _____ (e.g. Tow/ Independent)	1) Claim status: Normal/Reject/Private Settle	
Legal Cost S\$ _____	2) Report Format:	
	3) Survey fee:	
Total: S\$ _____ Global Sum S\$:		
FINAL PAYMENT Date/Time: _____ Confirm with: _____ Email <input type="checkbox"/> Call <input type="checkbox"/>		
Payee 1: S\$ _____ Name 1: _____		
Payee 2: (Strike if N.A.) S\$ _____ Name 2: _____		
Payee 3: (Strike if N.A.) S\$ _____ Name 3: _____		